

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000008927

**Entity Name:** LAS OLAS CHABAD JEWISH CENTER, INC.

**Current Principal Place of Business:**

1304 E. LAS OLAS BLVD.  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

1304 E. LAS OLAS BLVD.  
FORT LAUDERDALE, FL 33301

**FEI Number:** 27-3608221

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SHANOWITZ, CHAYA M  
1304 E. LAS OLAS BLVD.  
FORT LAUDERDALE, FL 33301 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name MOGILEVSKY, ISRAEL  
Address 672 EMPIRE BLVD. #5-B  
City-State-Zip: BROOKLYN NY 11213  
  
Title VP  
Name SLAVATICKI, CHAIM  
Address 1811 NE 8TH ST.  
City-State-Zip: FORT LAUDERDALE FL 33304

Title D  
Name BLECHER, LEVI  
Address 1277 PRESIDENT STREET  
City-State-Zip: BROOKLYN NY 11213  
  
Title PTS  
Name SHANOWITZ, CHAYA  
Address 1811 NE 8TH ST.  
City-State-Zip: FORT LAUDERDALE FL 33304

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHAIM SLAVATICKI

VP

01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date