

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N31168

**FILED  
Jan 10, 2017  
Secretary of State  
CC2763536267**

**Entity Name:** CHABAD OF MIAMI AND SOUTH DADE INC.

**Current Principal Place of Business:**

3713 MAIN HIGHWAY  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

3713 MAIN HIGHWAY  
COCONUT GROVE, FL 33133

**FEI Number: 65-0132853**

**Certificate of Status Desired: No**

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

FELLIG, YAKOV  
3713 MAIN HIGHWAY  
COCONUT GROVE, FL 33133 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 DP  
Name FELLIG, YAKOV  
Address 4005 EL PRADO BLVD.  
City-State-Zip: COCONUT GROVE FL 33133

Title DT  
Name FELLIG, GUTAL  
Address 4005 EL PRADO BLVD.  
City-State-Zip: COCONUT GROVE FL 33133

Title DVP  
Name FELLIG, MENACHEM  
Address 1251 HARDEE ROAD  
City-State-Zip: CORAL GABLES FL 33146

Title D/VP  
Name GOURARIE, CHANA  
Address 3713 MAIN HIGHWAY  
City-State-Zip: COCONUT GROVE FL 33133

Title VP  
Name FELLIG, ZALMAN  
Address 3779 LOQUAT AVE  
City-State-Zip: MIAMI FL 33133

*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: YAKOV FELLIG**

**PRESIDENT**

**01/10/2017**

Electronic Signature of Signing Officer/Director Detail

Date