

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N42067

**Entity Name:** CHABAD LUBAVITCH OF NORTH BROWARD AND PALM BEACH COUNTIES, INC.

**FILED**  
**Mar 07, 2023**  
**Secretary of State**  
**7998042490CC**

**Current Principal Place of Business:**

7170 LOXAHATCHEE RD.  
PARKLAND, FL 33067

**Current Mailing Address:**

7170 LOXAHATCHEE RD.  
PARKLAND, FL 33067

**FEI Number: 65-0200283**

**Certificate of Status Desired: Yes**

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

BISTON, JOSEPH  
7720 NW 63RD AVE  
PARKLAND, FL 33067 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	Title	DST
Name	BISTON, JOSEPH	Name	BISTON, BAYLA
Address	7720 N.W. 63RD AVE	Address	7720 NW 63RD AVE
City-State-Zip:	PARKLAND FL 33067	City-State-Zip:	PARKLAND FL 33067

Title VP  
 Name KORF, SHOLOM  
 Address 7170 LOXAHATCHEE ROAD  
 City-State-Zip: PARKLAND FL 33067

*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: RABBI YOSEF BISTON

DIRECTOR

03/07/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date