2020 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000004856

Entity Name: AMIT CHILDREN, INC.

Current Principal Place of Business:

49 W 37TH STREET, 5TH FLOOR NEW YORK, NY 10018

Current Mailing Address:

C/O PERLMAN & PERLMAN, LLP 1855 W. BASELINE ROAD, SUITE 250 MESA. AZ 85202-9012 US

FEI Number: 13-5631502 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SILBERMAN, JOEL 2700 N 29TH AVE, SUITE #203 HOLLYWOOD, FL 33020 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 P Title C

Name AXELROD TRACHTMAN, AUDREY Name STRAUS, JOYCE

Address 49 W 37TH STREET, 5TH FLOOR Address 49 W 37TH STREET, 5TH FLOOR

City-State-Zip: NEW YORK NY 10018 City-State-Zip: NEW YORK NY 10018

Title CHAIRMAN Title TREASURER

Name MERKIN, SHARON Name JACOBS, MALKY

Address 49 W 37TH STREET, 5TH FLOOR Address 49 W 37TH STREET, 5TH FLOOR

City-State-Zip: NEW YORK NY 10018 City-State-Zip: NEW YORK NY 10018

Title ASSOCIATE TREASURER Title DIRECTOR

Name FELIG, MINNA Name ADELSBERG, AVI

Address 49 W 37TH STREET, 5TH FLOOR Address 49 W 37TH STREET, 5TH FLOOR

City-State-Zip: NEW YORK NY 10018 City-State-Zip: NEW YORK NY 10018

Title DIRECTOR Title DIRECTOR

Name BRYK, LAURIE Name DOFT, SUZANNE

Address 49 W 37TH STREET, 5TH FLOOR Address 49 W 37TH STREET, 5TH FLOOR

City-State-Zip: NEW YORK NY 10018 City-State-Zip: NEW YORK NY 10018

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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: AUDREY AXELROD TRACHTMAN

PRESIDENT

04/23/2020

FILED Apr 23, 2020

Secretary of State

2755190822CC

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name JEROME, EVAN Name LOOKSTEIN, AUDREY

Address 49 W 37TH STREET, 5TH FLOOR Address 49 W 37TH STREET, 5TH FLOOR

City-State-Zip: NEW YORK NY 10018 City-State-Zip: NEW YORK NY 10018

Title DIRECTOR Title DIRECTOR

Name MARANS, ZIPPORAH Name NORDLICHT, BARBARA

Address 49 W 37TH STREET, 5TH FLOOR Address 49 W 37TH STREET, 5TH FLOOR

City-State-Zip: NEW YORK NY 10018 City-State-Zip: NEW YORK NY 10018

TitleDIRECTORTitleDIRECTORNameSEIF, HARRIETNameSHIFF, DEENA

Address 49 W 37TH STREET, 5TH FLOOR Address 49 W 37TH STREET, 5TH FLOOR

City-State-Zip: NEW YORK NY 10018 City-State-Zip: NEW YORK NY 10018

Title DIRECTOR Title DIRECTOR

Name STERN, TRUDY Name PRINCE STONEHIL, ROBYN

Address 49 W 37TH STREET, 5TH FLOOR Address 49 W 37TH STREET, 5TH FLOOR

City-State-Zip: NEW YORK NY 10018 City-State-Zip: NEW YORK NY 10018

Title DIRECTOR Title DIRECTOR

Name TROPPER, INA Name WASSERMAN, ANNE

Address 49 W 37TH STREET, 5TH FLOOR Address 49 W 37TH STREET, 5TH FLOOR

City-State-Zip: NEW YORK NY 10018 City-State-Zip: NEW YORK NY 10018

Title DIRECTOR Title SECRETARY

Name BENISHAI, AMANDA Name GOLOMBECK, CARYN

Address 49 W 37TH STREET, 5TH FLOOR Address 49 W 37TH STREET, 5TH FLOOR

City-State-Zip: NEW YORK NY 10018