

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000284

FILED
Mar 20, 2009
Secretary of State

Entity Name: DAB FOUNDATION, INC.

Current Principal Place of Business:

20533 BISCAYNE BLVD.
494
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

20533 BISCAYNE BLVD.
494
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 58-6263884 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUKERMAN, HAIM M
20533 BISCAYNE BLVD.
494
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: ZUKERMAN, HAIM M
Address: 20533 BISCAYNE BLVD.
City-St-Zip: AVENTURA, FL 33180

Title: V () Delete
Name: EVANS, JOHN H
Address: 1702 S. WASHINGTON AVENUE
City-St-Zip: TITUSVILLE, FL 32780

Title: VC () Delete
Name: MARXER, PETER DR
Address: 9490 VADUZ
City-St-Zip: RECHTSANWALT,

Title: D () Delete
Name: ZUKERMAN, NEHAMA
Address: 7 DANIN STREET
City-St-Zip: TEL AVIV ISRAEL,

Title: D () Delete
Name: ZEMER, IDIT
Address: 10 EINSTEIN STREET
City-St-Zip: RAANANA 46683 ISRAEL,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VC (X) Change () Addition
Name: NESENSOHN, OLIVER DR
Address: 9490 VADUZ
City-St-Zip: RECHTSANWALT, LI

Title: D (X) Change () Addition
Name: LABENSKI, CHAIM
Address: 7 DANIN STREET
City-St-Zip: TEL AVIV ISRAEL, IL

Title: D (X) Change () Addition
Name: ZEMER, IDIT
Address: 10 EINSTEIN STREET
City-St-Zip: RAANANA, IL 46683 IL

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAIM M. ZUKERMAN

D

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date