NOT-FOR-PROFIT CORPORATION

FILED Mar 25, 2002 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # N 35 656 03-25-2002 90039 015 ****61.25 Hedva Eibeshutz Institute of Holocaust Studies, 421400 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business Mailing Address 1761 E. 19 Street 1761 E. 19 Street Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For City & State 4. FEI Number New York New York Brooklyn Not Applicable Brooklyn Country 11229 Country \$8.75 Additional 5. Certificate of Status Desired 11229 U.S Fee Required 7. Name and Address of Current Registered Agent Name DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE Zip Code City FL 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** Initial or Amended UBR OFFICERS AND DIRECTORS 10. TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE TITLE Elbeshutz, Jehoshua NAME 6900 Bay Drive #4D Miami Beach, Florida STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Eilenberg, anna 6900 Bay Drive # 4D Miami Beach, Florida STREET ADDRESS STREET ADDRESS DO-NOT-WRITE CITY-ST-ZIP CITY-ST-7IP TITLE IN THIS SPACE 0 Eilenberg, Eli M NAME NAME 1761 East 19 Street STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Brooklyn, Ny. TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or on an attachment with an address, with all other like empowered

TITLE NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

305-868-3471

ATTN ANNA

2/20/02

NAME

CORPORATE DETAIL RECORD SCREEN 2/20/02 CORPORATE DETAIL RECORD SCREEN
NUM: N35656 ST:FL ACTIVE/FL NON-PROF FLD: 12/14/1989 8:59 AM

LAST: REINSTATEMENT

FLD: 11/21/1996

سندان والدار المهمان المهم ويستع الكان الدارات

FEI#: 65-0228795

: HRDVA EIBESHUTZ INSTITUTE OF HOLOCAUST STUDIES, INC.

PRINCIPAL: 1761 E 19 ST
ADDRESS BROOKLYN, NY 11229 US

CHANGED: 04/06/95

RA NAME : EIBESHITZ, JEHOSHUA RA ADDR : 6900 BAY DRIVE

NAME CHG: 07/28/92

ADDR CHG: 04/06/95

#4D

MIAMI BEACH, FL 33141 US

ANN REP : (1999) A 03/10/99 (2000) A 02/24/00 (2001) A 02/06/01

2/20/02

OFFICER/DIRECTOR DETAIL SCREEN

9:01 AM

CORP NUMBER: N35656

CORP NAME: HEDVA EIBESHUTZ INSTITUTE OF HOLOCAUST !

TITLE: PD

NAME: EILENBERG, JOSEPH R MD.

1823 AVENUE O

BROOKLYN, NY

TITLE: VTD

NAME: EIBESHUTZ, JEHOSHUA

6900 BAY DRIVE, #4D

MIAMI BEACH, FL

TITLE: SD

NAME: EILENBERG, ANNA

6900 BAY DRIVE, #4D

MIAMI BEACH, FL

TITLE: D

NAME: EILENBERG, ELI M

1761 EAST 19 STREET

BROOKLYN, NY

---- THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT ----

actachus + Det ____ N35686 ______ N35686

ANNA EILENDERG 1761 E 19 ST BROOKLYN NY 11229

7183770868

Request taken by: jkiernan 6 02-20-2002

The forms you recently requested from this office are:

(2) 200. COR Non Profit A/R

Should you have any questions or need any further information, please contact us at the address below:

Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314