To be filed annually during the month of June

-**€** •

Revised 5/98



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

NON-PROFIT CORPORATION

Corporate ID Number <u>DNP-</u>	31184	Annual Report for the year 2001
The name of the corporat	ion is Congregati	on Shaare Zedek-Sons Of Abraham
. The state or other jurisdic	tion under the law	s of which it is incorporated is RHODE ISLAND
		corporation in this state is 688 BROAD STREET PROVIDENCE, RI
02903		
		state at that address is <u>JOSEPH MARGOLIS</u>
The character of the affair (HOUSE OF	rs which it is actua ' WORSHIP)	Illy conducting in Rhode Island, briefly stated, is SYNAGOGUE
If a foreign corporation, the incorporated is	e address of its pr	rincipal office in the state or other jurisdiction under the laws of which it is
Corporate address in Rho	de Island 688 B	Broad St. Providence, R.I. 02907/P.O. Box 7266
_	<u> </u>	
number of directors of a d	omestic (Rhode Is	fficers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the land) corporation shall not be less than three (3).)
	OFFICE	ADDRESS
Judah Rosen	Director	34 Rangeley Rd. Cranston, R.I. 02920
MAX KERZNER SAM KERZNER	Director	35 WILLOW DRIVE CRANSTON, R.I. 02920
	Director	PARKSIDE DRIVE CRANSTON, R.I. 02910
JOSEPH MARGOLIS	President	76 Warrington St. Providence, R.I. 02907
PHILIP ROSENFIEL	D Vice-President	307 GREENWICH AVE- APT 218E WARWICK, RI 0288
Charles Tapper	Secretary	175 Hoffman Ave. Cranston, R.I. 02920
CHARLES TAPPER	Treasurer	175 HOFFMAN AVE. CRANSTON, R.I. 02920
ated: JUNE 5, 20	001	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
	i l .	
	ij,	CONGREGATION SHAARE ZEDEK-SONS OF ABRAHAM Exact Name of Corporation SYNAGOGUE
FOR SECRETARY OF STATE USE	ONT	$1 \cdot 1 \cdot$
~-Q.	_	By Joseph Margo us
Date:	_	Title <u>fresident</u>
ck No.:	_	(Report must be signed by an officer)
	I	Form No. 631