



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

**Return of Private Foundation**  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation

OMB No. 1545-0052

**2008**

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year 2008, or tax year beginning

, 2008, and ending

, 20

G Check all that apply: ☐ Initial return ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.

Name of foundation

SAM BERMAN CHARITABLE FOUNDATION

Number and street (or P.O. box number if mail is not delivered to street address)

Room/suite

16251 N.W. 54TH AVENUE

City or town, state, and ZIP code

MIAMI, FL 33014

A Employer identification number

59-2812513

B Telephone number (see page 10 of the instructions)

(305) 624-9666

C If exemption application is pending, check here ☐

D 1. Foreign organizations, check here ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

H Check type of organization ☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ☐ \$

14,339,234.

J Accounting method: ☒ Cash ☐ Accrual

☐ Other (specify)

(Part I, column (d) must be on cash basis.)

**Part I Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions).)

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)	1,636,117.			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.				
3 Interest on savings and temporary cash investments	94,312.	94,312.		STMT 1
4 Dividends and interest from securities	1,655.	1,655.		STMT 2
5a Gross rents	1,213,230.	1,213,230.		
b Net rental income or (loss)	590,457.			
6a Net gain or (loss) from sale of assets not on line 10				
b Gross sales price for all assets on line 6a				
7 Capital gain net income (from Part IV, line 2)				
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	2,945,314.	1,309,197.		
13 Compensation of officers, directors, trustees, etc.	275,110.	275,110.		25,000.
14 Other employee salaries and wages	55,120.	55,120.		18,373.
15 Pension plans, employee benefits	8,814.	8,814.		2,938.
16a Legal fees (attach schedule) STMT 3	9,489.	9,489.	NONE	4,745.
b Accounting fees (attach schedule) STMT 4	30,000.	30,000.	NONE	15,000.
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see page 14 of the instructions)	21,180.	21,180.		
19 Depreciation (attach schedule) and depletion	331,456.	331,456.		
20 Occupancy	388,898.	388,898.		
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule) STMT 6	253,879.	253,879.		9,845.
24 Total operating and administrative expenses. Add lines 13 through 23	1,373,946.	1,373,946.	NONE	75,901.
25 Contributions, gifts, grants paid	3,150.			3,150.
26 Total expenses and disbursements. Add lines 24 and 25	1,377,096.	1,373,946.	NONE	79,051.
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	1,568,218.			
b Net investment income (if negative, enter -0-)		-0-		
c Adjusted net income (if negative, enter -0-)			-0-	

Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. \*\*STMT 5

Form 990-PF (2008)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing		1,048,889.	714,914.	714,914.
	2	Savings and temporary cash investments			1,704,443.	1,704,443.
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10 a	Investments - U.S. and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule)				
	c	Investments - corporate bonds (attach schedule)				
	11	Investments - land, buildings, and equipment: basis	11,004,429.			STMT 8
	Less: accumulated depreciation (attach schedule)	331,456.		11,004,429.	10,672,973.	10,672,973.
12	Investments - mortgage loans			530,000.	530,000.	
13	Investments - other (attach schedule)	STMT 9		640,800.	716,904.	716,904.
14	Land, buildings, and equipment: basis					
	Less: accumulated depreciation (attach schedule)					
15	Other assets (describe)					
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)			12,694,118.	14,339,234.	14,339,234.
Liabilities	17	Accounts payable and accrued expenses		NONE	6,288.	
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe)	STMT 10			70,610.
23	Total liabilities (add lines 17 through 22)			NONE	76,898.	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here	<input type="checkbox"/>			
		and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	<input checked="" type="checkbox"/>			
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds			12,694,118.	14,262,336.
30	Total net assets or fund balances (see page 17 of the instructions)			12,694,118.	14,262,336.	
31	Total liabilities and net assets/fund balances (see page 17 of the instructions)			12,694,118.	14,339,234.	

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	12,694,118.
2	Enter amount from Part I, line 27a	2	1,568,218.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	14,262,336.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	14,262,336.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co)			(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss) . . . . .	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8. . . . .			3		

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? . . . . ☐ Yes ☒ No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2007	NONE	311,684.	NONE
2006			
2005			
2004			
2003			
2 Total of line 1, column (d) . . . . .			2 NONE
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .			3 NONE
4 Enter the net value of noncharitable-use assets for 2008 from Part X, line 5 . . . . .			4 12,838,197.
5 Multiply line 4 by line 3 . . . . .			5 NONE
6 Enter 1% of net investment income (1% of Part I, line 27b) . . . . .			6
7 Add lines 5 and 6 . . . . .			7 NONE
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.			8 79,051.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the instructions)**

1a * Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. . . . .		1	NONE
Date of ruling letter: _____ (attach copy of ruling letter if necessary - see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . . . . .		2	
3 Add lines 1 and 2 . . . . .		3	NONE
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . . . . .		4	NONE
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	NONE
<b>Credits/Payments:</b>			
a 2008 estimated tax payments and 2007 overpayment credited to 2008 . . . . .	6a		
b Exempt foreign organizations-tax withheld at source . . . . .	6b	NONE	
c Tax paid with application for extension of time to file (Form 8868) . . . . .	6c	NONE	
d Backup withholding erroneously withheld . . . . .	6d		
7 Total credits and payments. Add lines 6a through 6d . . . . .	7		NONE
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .	9		NONE
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . . .	10		
11 Enter the amount of line 10 to be. Credited to 2009 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/> <b>11</b>			

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . .	1b	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year? . . . . .	1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers. <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . .	2	X
If "Yes," attach a detailed description of the activities		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	4b	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .	5	X
If "Yes," attach the statement required by General Instruction T.		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV. . . . .	7	X
8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input type="checkbox"/> FL, . . . . .		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation . . . . .	8b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV . . . . .	9	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .	10	X

Form 990-PF (2008)

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(3)? If "Yes," attach schedule (see page 20 of the instructions) . . . STMT 11	11	X	
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address ▶ N/A				
14	The books are in care of ▶ SHERYL GREENWALD Telephone no. ▶ 305-379-7000			
Located at ▶ 16251 NW 54TH AVENUE MIAMI, FL ZIP + 4 ▶ 33014				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here . . . N/A	▶ <input type="checkbox"/>		
and enter the amount of tax-exempt interest received or accrued during the year . . . ▶ 15				

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? . . . . . <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here ▶ <input type="checkbox"/>	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2008? . . . . .	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2008? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see page 20 of the instructions) . . . . .	2b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2008.) . . . . .	3b	X
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2008? . . . . .	4b	X

Form 990-PF (2008)

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? ☐ **5b** N/A

Organizations relying on a current notice regarding disaster assistance check here ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No **6b** X

If you answered "Yes" to 6b, also file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No **7b** X

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 12		275,110.	2,468.	NONE

**2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 13		55,120.	6,346.	NONE

Total number of other employees paid over \$50,000 ☐ NONE

Form 990-PF (2008)

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SEE STATEMENT 14		99,485.

Total number of others receiving over \$50,000 for professional services . . . . . NONE

**Part IX-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1 N/A	
2	
3	
4	

**Part IX-B** Summary of Program-Related Investments (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

1 NONE	
2	
All other program-related investments. See page 24 of the instructions.	
3 NONE	

Total. Add lines 1 through 3 . . . . .

Form 990-PF (2008)



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	396,406.
b	Average of monthly cash balances	1b	1,518,474.
c	Fair market value of all other assets (see page 24 of the instructions)	1c	11,118,823.
d	Total (add lines 1a, b, and c)	1d	13,033,703.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	13,033,703.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of the instructions)	4	195,506.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	12,838,197.
6	Minimum investment return. Enter 5% of line 5	6	641,910.

**Part XI Distributable Amount** (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	641,910.
2a	Tax on investment income for 2008 from Part VI, line 5	2a	NONE
b	Income tax for 2008. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	NONE
3	Distributable amount before adjustments Subtract line 2c from line 1	3	641,910.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	641,910.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	641,910.

**Part XII Qualifying Distributions** (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	79,051.
b	Program-related investments - total from Part IX-B	1b	NONE
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	79,051.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	79,051.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI, line 7 . . . . .				641,910.
2 Undistributed income, if any, as of the end of 2007:				
a Enter amount for 2007 only . . . . .			15,584.	
b Total for prior years: 20 . . . 20 . . . 20 . . .				
3 Excess distributions carryover, if any, to 2008:				
a From 2003 . . . . .				
b From 2004 . . . . .				
c From 2005 . . . . .				
d From 2006 . . . . .				
e From 2007 . . . . .				
f Total of lines 3a through e . . . . .				
4 Qualifying distributions for 2008 from Part XII, line 4. ► \$ . . . . . 79,051.				
a Applied to 2007, but not more than line 2a . . .			15,584.	
b Applied to undistributed income of prior years (Election required - see page 26 of the instructions) . . . . .				
c Treated as distributions out of corpus (Election required - see page 26 of the instructions) . . . . .				
d Applied to 2008 distributable amount . . . . .				63,467.
e Remaining amount distributed out of corpus . . .	NONE			
5 Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a) ) . . . . .				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 . . . . .	NONE			
b Prior years' undistributed income. Subtract line 4b from line 2b . . . . .				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . .				
d Subtract line 6c from line 6b. Taxable amount - see page 27 of the instructions . . . . .				
e Undistributed income for 2007. Subtract line 4a from line 2a. Taxable amount - see page 27 of the instructions . . . . .				
f Undistributed income for 2008. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2009. . . . .				578,443.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) . . . . .				
8 Excess distributions carryover from 2003 not applied on line 5 or line 7 (see page 27 of the instructions) . . . . .				
9 Excess distributions carryover to 2009. Subtract lines 7 and 8 from line 6a . . . . .	NONE			
10 Analysis of line 9:				
a Excess from 2004 . . . . .				
b Excess from 2005 . . . . .				
c Excess from 2006 . . . . .				
d Excess from 2007 . . . . .				
e Excess from 2008 . . . . .	NONE			



**Part XV** Supplementary Information (continued)**3** Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
<b>Total</b> .....			<b>3a</b>	
<b>b</b> Approved for future payment				
<b>Total</b> .....			<b>3b</b>	



1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash	1a(1)		X
(2) Other assets	1a(2)		X
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
(3) Rental of facilities, equipment, or other assets	1b(3)		X
(4) Reimbursement arrangements	1b(4)		X
(5) Loans or loan guarantees	1b(5)		X
(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

**b If "Yes," complete the following schedule**

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer or trustee

Date \_\_\_\_\_

Title

**Paid  
Preparer's  
Use Only**

Preparer's

Date \_\_\_\_\_

Check if self-employed ☐

Preparer's identifying number  
(See Signature on page 30 of the  
instructions)

Firm's name (or yours if self-employed), address, and ZIP code

BERKOWITZ DICK POLLACK & BRANT, LLP  
200 S. BISCAYNE BLVD., SIXTH FLOOR  
MIAMI, FL 33131

EN ►

Phone no. 305 379-7000

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

**2008**

Name of the organization

SAM BERMAN CHARITABLE FOUNDATION

Employer identification number

59-2812513

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

**General Rule**

- ☒ For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

- ☐ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3 % support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ► \$

**Caution.** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization **SAM BERMAN CHARITABLE FOUNDATION**

Employer identification number

**59-2812513****Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<b>1</b>	<b>ESTATE OF SAM BERMAN</b>  <b>16251 N.W. 54TH AVENUE</b>  <b>MIAMI, FL 33014</b>	\$ <b>1,636,117.</b>	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
INTEREST INCOME	67,296.	67,296.
OTHER INTEREST INCOME	26,938.	26,938.
A. BERMAN ASSOCIATES K-1	78.	78.
TOTAL	94,312.	94,312.

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
DIVIDENDS MONEY MARKET	1,655.	1,655.
TOTAL	1,655.	1,655.

FORM 990PF, PART I - LEGAL FEES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
MARIA AIRROLA	357.	357.		179.
ANTHONY SANCEZ	4,107.	4,107.		2,053.
RITTER ZARELSKY	1,771.	1,771.		886.
BLOOM AND MINSK	3,254.	3,254.		1,627.
TOTALS	9,489.	9,489.	NONE	4,745.

FORM 990PF, PART I - ACCOUNTING FEES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
ACCOUNTING FEES	30,000.	30,000.		15,000.
TOTALS	30,000.	30,000.	NONE	15,000.

FORM 990PF, PART I - TAXES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
PAYROLL TAXES	20,807.	20,807.
LICENSES	373.	373.
TOTALS	21,180.	21,180.

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	CHARITABLE PURPOSES
COMMISSIONS	2,414.	2,414.	
COMPUTER EXPENSE	70.	70.	
DUES AND SUBSCRIPTIONS	635.	635.	
INSURANCE GENERAL	96,401.	96,401.	3,265.
OFFICE EXPENSE	2,154.	2,154.	1,403.
POSTAGE	1,403.	1,403.	
PROMOTION	10,565.	10,565.	
REPAIRS AND MAINTENANCE	129,272.	129,272.	
SECURITY	471.	471.	
SUPPLIES	1,905.	1,905.	1,905.
TELEPHONES	3,272.	3,272.	3,272.
UTILITIES	5,317.	5,317.	
TOTALS	253,879.	253,879.	9,845.

## INVESTMENTS - LAND, BUILDINGS, EQUIPMENT

ASSET DESCRIPTION	METHOD/ CLASS	FIXED ASSET DETAIL			ACCUMULATED DEPRECIATION DETAIL		
		BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE	BEGINNING BALANCE	ADDITIONS
LAND 5390 NW 161ST	L	181,000.			181,000.		
LAND 5325-5331 159	L	120,000.			120,000.		
LAND 5530-5540 164	L	174,000.			174,000.		
LAND 16005 52AVE	L	267,000.			267,000.		
LAND 16115 52AVE	L	446,000.			446,000.		
LAND 16251 NW54TH	L	85,000.			85,000.		
BLDG 5390 NW 161	M39		1,226,971.		1,226,971.	31,460.	31,460.
BLDG 5325 NW 159TH	M39		813,462.		813,462.	20,857.	20,857.
BLDG 5530 NW 164TH	M39		1,179,519.		1,179,519.	30,243.	30,243.
BLDG 16085 NW 52AV	M39		1,809,952.		1,809,952.	46,407.	46,407.
BLDG 16115 NW 52AV	M39		3,023,365.		3,023,365.	77,519.	77,519.
BLDG 16251 NW 54TH	M39		576,202.		576,202.	14,774.	14,774.
IMPROV 5390 NW 161	SL		156,682.		156,682.	15,668.	15,668.
IMPROV NW159TH	SL		103,869.		103,869.	10,387.	10,387.
IMPROV 5530 164TH	SL		150,622.		150,622.	15,062.	15,062.
IMPROV 16085 52ND	SL		231,127.		231,127.	23,113.	23,113.
IMPROV 16115 52ND	SL		386,078.		386,078.	38,608.	38,608.
IMPROV 16251 54TH	SL		73,580.		73,580.	7,358.	7,358.

INVESTMENTS - LAND, BUILDINGS, EQUIPMENT

		ACCUMULATED DEPRECIATION DETAIL			
		FIXED ASSET DETAIL			
ASSET DESCRIPTION	METHOD/ CLASS	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE
TOTALS		1,273,000.			331,456.



SAM BERMAN CHARITABLE FOUNDATION

59-2812513

FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
A. BERMAN ASSOC. INTEREST	716,904.	716,904.
TOTALS	716,904.	716,904.

FORM 990PF, PART II - OTHER LIABILITIES

DESCRIPTION	ENDING BOOK VALUE
SECURITY DEPOSITS	70,610.
TOTALS	70,610.

FORM 990PF, PART VII-A, LINE 11A-TRANSFERS FROM CONT. ENT. STATEMENT  
=====

CONTROLLED ENTITY'S NAME: A. BERMAN ASSOCIATES  
CONTROLLED ENTITY'S ADDRESS: 4741 ATLANTIC BOULEVARD  
CITY, STATE & ZIP: JACKSONVILLE, FL 32207  
EIN: 59-1631738  
TRANSFER AMOUNT: NONE  
EXPLANATION OF TRANSFER FROM CONTROLLED ENTITY:

SAM BERMAN CHARITABLE FOUNDATION

59-2812513

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
CAROLE BERMAN 16251 N.W. 54TH AVENUE MIAMI, FL 33014	PRESIDENT AND DIRECTOR 40.	275,110.	2,468.	NONE
GRAND TOTALS				
		275,110.	2,468.	NONE

SAM BERMAN CHARITABLE FOUNDATION

59-2812513

990PF, PART VIII - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SUSAN WHEELER 21660 NW 8TH COURT PEMBROKE PINES, FL 33512	OFFICE MANAGER 40.	55,120.	6,346.	NONE
	TOTAL COMPENSATION	55,120.	6,346.	NONE

990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS  
=====NAME AND ADDRESS  
-----TYPE OF SERVICE  
-----COMPENSATION  
-----WALTON ROOFING INC.  
6388 JOHNSON STREET  
HOLLYWOOD, FL 33024

ROOF REPAIR

99,485.

TOTAL COMPENSATION

-----  
99,485.  
=====

## Description of Property

DEPRECIATION														
Asset description	Date placed in service	Unadjusted Cost or basis	Basis reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Me- thod	Conv	Life	ACRS class	MA CRS class	Current-year 179 expense	Current-year depreciation
LAND 5390 NW 161ST	12/27/2007	181,000.												
LAND 5325-5331 159	12/27/2007	120,000.												
LAND 5530-5540 164	12/27/2007	174,000.												
LAND 16005 52AVE	12/27/2007	267,000.												
LAND 16115 52AVE	12/27/2007	446,000.												
LAND 16251 NW54TH	12/27/2007	85,000.												
BLDG 5390 NW 161	12/27/2007	1,226,971.			1,226,971.		31,460.	SL	MH			39		31,460.
BLDG 5325 NW 159TH	12/27/2007	813,462.			813,462.		20,857.	SL	MH			39		20,857.
BLDG 5530 NW 164TH	12/27/2007	1,179,519.			1,179,519.		30,243.	SL	MH			39		30,243.
BLDG 16085 NW 52AV	12/27/2007	1,809,952.			1,809,952.		46,407.	SL	MH			39		46,407.
BLDG 16115 NW 52AV	12/27/2007	3,023,365.			3,023,365.		77,519.	SL	MH			39		77,519.
BLDG 16251 NW 54TH	12/27/2007	576,202.			576,202.		14,774.	SL	MH			39		14,774.
IMPROV 5390 NW 161	12/27/2007	156,682.			156,682.		15,668.	SL		10.000	19			15,668.
IMPROV NW159TH	12/27/2007	103,869.			103,869.		10,387.	SL		10.000				10,387.
IMPROV 5530 164TH	12/27/2007	150,622.			150,622.		15,062.	SL		10.000				15,062.
IMPROV 16085 52ND	12/27/2007	231,127.			231,127.		23,113.	SL		10.000				23,113.
IMPROV 16115 52ND	12/27/2007	386,078.			386,078.		38,608.	SL		10.000				38,608.
IMPROV 16251 54TH	12/27/2007	73,580.			73,580.		7,358.	SL		10.000				7,358.
Less: Retired Assets . . . . .														
Subtotal		11004429.			9,731,429.		331,456.							331,456.

**Listed Property**

[illegible]

## AMORTIZATION

AMORTIZATION		Date placed in service	Cost or basis	Accumulated amortization	Ending accumulated amortization	Code	Life	Current-year amortization
Asset description								
						2		
TOTALS								

### Assets Retired

15A  
15B, 15C, 15D

000142061000

BX90241000					
3307	12/15/2010	13:38:17	V08-8.3	24120	
9294AR					

## FEDERAL FOOTNOTES

=====

REQUEST FOR RE-INSTATEMENT: THE SAM BERMAN CHARITABLE FOUNDATION WAS INACTIVE FROM 1991 TO 2007. THE FOUNDATION RECENTLY FILED ITS FORM 990-PF FOR 2007 AND ASKS FOR REINSTATEMENT. THE INACTIVITY RESULTED DUE TO PENDING DISTRIBUTION OF ASSETS FROM THE ESTATE OF SAM BERMAN EIN: 20-6341244 TO THE CHARITABLE FOUNDATION.

DURING THE TIME OF INACTIVITY, THE FOUNDATION BELIEVED FUTURE TAX RETURNS WERE NOT REQUIRED TO BE FILED BASED ON CORRESPONDENCE RECEIVED FROM THE IRS STATING THAT THE FOUNDATION WAS NOT LEGALLY REQUIRED TO FILE A TAX RETURN IN 1994. (SEE ATTACHED).

THE PURPOSE OF THE FOUNDATION IS TO EXPEND GRANTS FOR ITS CHARITABLE PURPOSE FROM ASSETS CONTRIBUTED FROM THE SAM BERMAN ESTATE. THIS CONTRIBUTION FROM THE ESTATE TO THE FOUNDATION OCCURED ON DECEMBER 27, 2007.

DUE TO REASONABLE CAUSE AND RELIANCE ON CORRESPONDENCE RECEIVED FROM THE IRS, THE TAXPAYER REQUESTS AN ABATEMENT OF PENALTIES FOR NON-FILING FORM 990PF FOR THE TAX YEARS FROM 1992 TO 2007. ANY PENALTIES IMPOSED WOULD CAUSE DUE HARDSHIP FOR THE FOUNDATION AND AN OBSTACLE TO CARRYING OUT ITS CHARITABLE FUNCTIONS. THE FOUNDATION MAINTAINS ITS ACTIVE STATUS WITH THE STATE DEPARTMENT (SEE ATTACHED).



**2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT****DOCUMENT# N20902****FILED  
Mar 09, 2010  
Secretary of State****Entity Name:** THE SAM BERMAN CHARITABLE FOUNDATION, INC.**Current Principal Place of Business:**16251 NW 54TH AVE  
MIAMI GARDENS, FL 33014 US**New Principal Place of Business:****Current Mailing Address:**16251 NW 54TH AVE  
MIAMI GARDENS, FL 33014 US**New Mailing Address:****FEI Number:** 59-2812513**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BERMAN, CAROLE  
16251 NW 54TH AVE  
MIAMI GARDENS, FL 33014 US**Name and Address of New Registered Agent:**BLAIR, LAURENCE I  
100 WEST CYPRESS CREEK ROAD  
700  
FORT LAUDERDALE, FL 33309 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** LAURENCE I. BLAIR

03/09/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title	P
Name	BERMAN, CAROLE
Address	16251 NW 54TH AVE
City-St-Zip	MIAMI GARDENS, FL 33014 US
Title	VPST
Name	GREENWALD, SHERYL
Address	16251 NW 54TH AVE
City-St-Zip	MIAMI GARDENS, FL 33014 US

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.** CAROLE BERMAN

PRES

03/09/2010

Electronic Signature of Signing Officer or Director

Date