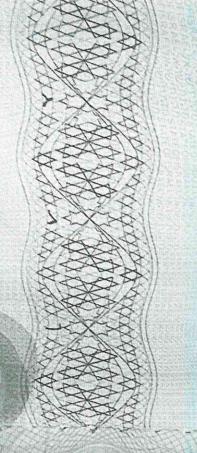
SHIPPER / EXPORTER (NAME & ADDRESS)	MBINED TRANSPO	BOOKING No.	cyrateu 3	hipping Serv	ices Ltd
BURKE BASTIAN JAC EMEK HEYALA 14	ЭВ	100000000000000000000000000000000000000	14293598/1	WAYBILL No. ZIMUASH4293598	
MODIIN		SPECIAL AGREEM	ENT: This Waybill is not a bill of I		
		Hogue Rules and H Waybil shall be sut	bject to U.S. COGS a which has	a contract of carriage as defined and for shipments to or from or t	in Article 1(b) of the
		Goods. Delivery po	negotiable straight bill of lading unwant to this non-negotiable wa	the made to the Construct also apply to be been this Waybill is not a division will be made to the Construc-	this Waybill as it to coment of title to the
CONSIGNEE (NAME & ADDRESS)		applicable without s	on a scenity at the Port of Dest urrender or delivey of this weybill.	ading and no bill of lading will be a contract of cominge as define and for shipments to or from or the hell by this contract also apply is. I, however this Waybill is not a di- pbill will be made to the Consigne- nation or final Destination (if con-	tracted for), whichever
BURKE BASTIAN JACO 320 MIRACLE MILE, ST	)B	FORWARDING AGE	ENT F.M.C. No.		
CORAL GABLES, FL. 33	= 201 3143				
PASSPORT #35797510					
		POINT AND COUNT	RY OF ORIGIN (FOR SHIPPER	'e perentuar aviva	
NON-NEGOTIABLE)				S REPERENCE ONLY)	
OMEGA RELOCATION (	EL) INC	REMARKS / EXPOR	T OR OTHER INSTRUCTIONS		
2/41 W.76 ST.		Reference	:FILE: 306936	2	
HIALEAH (MIAMI), FLOF TEL: 305-888-0337	IDA 33016	CY/CY	ON BOARD 11/11/2022		
FAX: 305-887-5121		THE TERM	IS AND CONDITIONS	OF THIS SEA WAYBIL	L CAN RF
		I COND OF	N THE CARRIER'S WE WW.ZIM.COM/HELP/S	DOITE AT.	
IITIAL CARRIAGE	PLACE OF RECEIPT OF GOODS *		TOTAL COMMITTELE	SEA-WAYBILL	
	(IF CONTRACTED FOR)			回総	
ESSEL * ZIM VANCOUVER	VOY. PORT OF LOADING *	***************************************			
	S5/W HAIFA				
DRT OF DESTINATION *	FINAL DESTINATION * (IF CONTRACTED FOR)	FURTHER ROUTING	(AT SHIPPER'S EXPENSE, RIS	K AND DESCRIPTION OF THE SECOND STATE OF THE S	
MIAMI, FL				AND RESPONSIBILITY)	
MKS & NOS. / CONT. NOS.	PARTICULARS	AS FURNISHED BY SHIPPI	ER		
Del 19 Secoly/IT alvane West Secols 1	DES	CRIPTION OF GOODS		WEIGHT	MEASUREMENT
CONT:SEGU1275629	90 PACKAGES			KGS	M3
1 CNT	USED HOUSEHOLD GOODS			2,585.00	34.79
SEAL: 2261432 /DV20 (CY/CY)	HS.9403.10			2.00	V.900511711.750
<u>, , , , , , , , , , , , , , , , , , , </u>					
	7				
	SHIPPER'S LOAD STOWAG	SE & COLINT	9		
	CONT TARE WEIGHT:	2200	,e		
		2200			
		* (1)			
		4			
	1				
•					
	DETAILS 1 CONT TOT. TARE	E : 2,200	CARGO W : TOTAL	2,585.00 FREIGHT	34.79
		PER	AMOUNT	PREPAID	COLLECT
		1			
Forwarder Reference: 5735	52				
SEAWAY B/L - NO ORIGINA	AL ISSUED				
	Wathir S	35			
PER'S DECLARED VALUE OF GOODS:	If shipper enters a value, Carriers "nankana"	DREM FREIGHT			
ryly axu au valorem treight will be charg	AD VALC If shipper enters a value, Carriers "package" ed (See Clause 21)	williabon of liability shall			
of Goods specified herein for carriers subject to the	ess otherwise stated herein, the Goods or packages or Contain	nors and to contain the	TOTAL		
the comment of the comment form Rules from the	and acknowledges of the Port of Leading (whichever is applicable	in to the Port of Plantage	IN WITNESS of the contract by or on behalf of Time Inter-	contained herein this Waybill has been o grated Shipping Services Ltd. (as Ca	igned
	of Containers, this indicates that the Container has been part	Shipper's representation as to the		years omplying dervices Ltd. (as Ca	mer).
So of the Goods as declared are unknown to and not ad of packages stated herein. If the acknowledged tally is most without the Gamer being represented and able to	y was an many of theods or the stores and	ch are consequently unknown to	FREIGHT PAYABLE AT		
as at the Goods as declared are unknown to and not as of speckages stated heren. If the acknowledged tally is most without the Commer being represented and table is accepting this Waybill the Shipper sourcesty account.	and agrees to be bound by all the terms, supulations, exce otherwise occuparated on the front another respectively.	prions, immations, liberies and			
se of the Useda as declared are unknown to and not an of puckages stated before. If the actionwheeling tally it in incess without the Gamber being represented and able to accepting this Warphili the Shipper expressly accepta- re stated harein, whether written, printed, stamped or I farilf Hules, Proglations and Shindedler, without ease do is made on the basis of the Sispore's acceptance and	otherwise incorporated on the form and or reverse side hereof phone, as fully as if they were all signed by the Shipper, and it discrements as absential.	as well as the provisions of the the Carrier's undertaking to carry	PLACE AND DATE OF ISSUE		
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or or the Goods as declared are unknown to end not as of packages stated herein. If the actionwelging the statement is the actionwelging the sea without the Camer being represented and wish in concepting size Waybil the Shipper sopressly accepts as stated herein, whether written, profined integral or inte	columnia to be admitted by all the terms, sipulations, exce- columnia on population in the form and/or precede die benefit plants, as fully as if they were all signed by the Scipper, and it discrements a storesaid going, the Shipper's attention is drawn to the fide hereof and include limitations of liability is auses 7 (Notice of Loss, Time Bart), 13 (Shipp and 22 (Law and Jurischiction). The Property of the store of	as well as the provisions of the the Carner's undertaking to carry fact that the terms of in respect of loss or	PLACE AND DATE OF ISSUE	22	



## מדינת ישראל STATE OF ISRAEL

PASSPORT TTCII



חתיכות בעל הדדמו/Holder's

3 30e

Type / סמל הסדינה / Code of State / סמל הסדינה / P / T
Sumame
BURKE
Given name

BASTIAN JACOB
Nationality
ISRAELI
Date of birth / אריך לידה
02/10/1982
Sex/ים Place of birth
M/ 7 GERMANY
Date of issue / האריך הוצאה

06/04/2022 Authority I.C. Passport at-JERUSALEM

P<ISRBURKE<<BASTIAN<JACOB<<<<<<<<<>35797510<9ISR8210025M32040503<3647369<9<<<00

## ISF Information

ISF Number	Reference N 306936	umber			ISF Type	
Importer	233000		0		ISF-10	
			Consignee			
Shipment Type 03 - Household Goods/Personal	Effects					
Bills of Lading						
Carrier: Mode of Trans	sportation: Va					
		essei, Contain	er			
04 1 1 1 1 1 1 1 1	Bill Number ZIMU ASH42	93598			Bill on File	9
Selling Party						
BURKE BASTIAN JACOB						
Street Number: 14 Street Name: EMEK HEYALA MODIIN, IL	s					
Buying Party						
BURKE ASTIAN JACOB						
Street Number: 320						R
Street Name: MIRACLE MILE ST CORL GABLES, FL 33143, US	E 201					
0, 15220, 12 03 143, 03						
Ship to Party						
BURKE ASTIAN JACOB						
Street Number: 320						
Street Name: MIRACLE MILE ST	E 201					
CORL GABLES, FL 33143, US						
Container Stuffing Location						
A UNIVERS TRANSIT						
Street Number: 14						
Street Name: HADARIM						
ASHDOD, IL						
Consolidator						
A. UNIVERS TRANSIT LTD						
Street Number: 14						
Street Name: HADARIM						
ASHDOD, IL						
/lanufacturer						
BURKE BASTIAN JACOB						
Street Number: 14						
treet Name: EMEK HEYALA IODIIN, IL						
art Number			122 ( 1221) A			
			Tariff Numbe	r Country of	Origin	
			980400	IL		
onsignee						
URKE BASTIAN JACOB						
					DUNS/DUNS+4:	35797510

soung Post Name

TEL AVIN Sumamic

20222641480001

Control Number

OTHER NATIO

BASTIAN JACOB

PASSBOY North day 35797510

Nationalit

2011102

Annotation

28SEP2022 Cours Date

Expiration Date 22SEP2026

020CT1982 Birth Date

MUST PRESENT APPROVED 1-797 OR 1-129S AT POE R8894802

PN-SP DISTRIBUTION LLC P#-WAC2228050256

PED-14AUG2025

VNUSABURKE<<BASTIAN<JACOB<<<<<<<< 35797510<91SR8210025M2609223L1TLV1V5SD062182



### PACKING INVENTORY

Shipper Name:

Packing Job Date: Origin Address:

Burak Bastian 25 Jul 2022 Israel

United States

Destination Address:



#### Packed Items

1	age# Item Clothes	Comment Wrapping	Room
2	Clothes	Medium Box	KOO
3		Medium Box	
4		Large Box	
5	Toys Toys	Large Box	
6		Large Box	
7	Toys  Bed, Youth	Large Box	
8	Bed, Youth	Wrapped	
9		Wrapped	
10	Toys	Large Box	
11	Toys	Large Box	
12	Toys	Large Box	
13	Bed single	Wrapped	
14	Bed single	Wrapped	
15	Clothes	Medium Box	
16	Clothes	Medium Box  Medium Box	
17	Clothes	Medium Box	
18	Clothes	Medium Box Medium Box	
19	Shoes	Medium Box Medium Box	
20	Decorations		
10	Clothes	Wrapped Medium Box	
2	Clothes	Medium Box Medium Box	
	Linen		
3 4	Blankets	Medium Box	
<del>4</del> 5	Blankets	Wrapped	
6	Pillows	Wrapped	
7	Bed, King Size	Large Box	
<i>r</i> В	Bed, King Size	Wrapped	
9	Bed, King Size	Wrapped	
	Mattress	Wrapped	
)	Clothes	Wrapped	
	Clothes	Medium Box	
?	Clothes	Medium Box	
3	Clothes	Medium Box	

C-1			
Shipper	Signature	on	packing

15

Shipper:Burak Bastian

04 Aug 2022

Foreman Signature on packing

Foreman: max glazer

A. Univers Transit Ltd.

Shipper Signature on delivery	Delivery Driver Signature	
**************************************	Delivery Driver Signature	
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		*******************************
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THE ALLEYS CO.		
Name:		
	Name	

Date \_



#### A. UNIVERS TRANSIT LTD

P Acceptage and make

35	Decorations	Mediu	700	
36	Decorations	Wrap	oed	
37	Decorations	Wrap	ed	
38	Decorations	Wrapp	ed	
39	Glass Table	Vrapp	ed	
40	Glass Table	Legs Wrapp	ied	
41	Chest	Wrapp	ed	
42	Chest	Wrapp	ed	
43	TV Stand	Wrapp	ed	
44	Decorations	Wrapp	ed	
45	Decorations	Wrapp	ed	
16	Decorations	Wrapp	ed	
17	Kitchenware	Wrapp	ed	
8	Kitchenware	Book/S	mall Box	
9	Kitchenware		mall Box	
0	Kitchenware		mall Box	
1	Kitchenware	1	mall Box	
2	Books		mall Box	
3	Books		mall Box	
4	Books		mall Box	
5			mall Box	
6	Books		mall Box	WAS BUILDING TO THE
7	Toys	Large B	A	
8	Toys	Large B		
9	Guitar	Wrappe	The state of the s	
	Fan	Wrappe	and the same and the same	
0 1	Guitar	Wrappe		
	Chest	Wrappe		
2	Chest	Wrapper		
3	Cedar Chest (Part of)	Ikea Wrapper		
	Cedar Chest (Part of)	Wrapper	and the same of th	
	Cedar Chest (Part of)	Wrapper		
	Cedar Chest (Part of)			-
	Kitchenware	Wrapped		
	Kitchenware	Book/Sm		
	Kitchenware	Book/Sm		
) 	Kitchenware	Book/Sm		
	Kitchenware	Book/Sm		ļ
	Kitchenware	Book/Sm		
-	Kitchenware	Book/Sm		ļ <del></del>
	Kitchenware	Book/Sm	manufacture and account of the contract of the	ļ <del></del>
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	Kitchenware	Book/Sma		
	Kitchenware	Book/Sma		ļ <del></del>
	Files	Book/Sma	II Box	
	Picture	Wrapped		
	Electric Appliance	Flat Box		<b></b>
	Electric Appliance	Wrapped		
	TV Stand	Wrapped		

Shipper Signature o	n packing
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Shipper:Burak Bastian 04 Aug 2022 Foreman Signature on packing

Foreman: max glazer

A. Univers Transit Ltd.

Shipper Signature on delivery	D	
*	Delivery Driver Signature	
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Lancas and the second s	::	
Name:		
reame	N/a	

Name:	Name:	
Date	Сотрани	



84	Laundry Basket		
85	Kitchenware	Wrapped	
86	Kitchenware	Book/Small Box	
37	Decorations	Book/Small Box	
38	Decorations	Wrapped	
39	Towels	Wrapped	
90	Clothes	 Medium Box	
		Medium Box	

## Total Number of Packages: 90

#### **Used Boxes Count**

Box Type	Quantity
Book/Small Box	23
Large Box	10
Medium Box	17
Flat Box	1
Wrapped	39

Shipper Signature on packing	Foreman Signature on packing			Market and Market M
186	OH.	Shipper Signature on delivery	Delivery Driver Signature	
Shipper:Burak Bastian	Foreman: max glazer			·
04 Aug 2022	A. Univers Transit I td	Name:	Name:	

A. Univers Transit Ltd.



#### DEPARTMENT OF HOMELAND SECURITY U.S. Customs and Border Protection

OMB APPROVAL NO. 1651-0014 EXPIRES: 11-30-2022 ESTIMATED BURDEN: 45 MIN.

## DECLARATION FOR FREE ENTRY OF UNACCOMPANIED ARTICLES

19 CFR 148.6, 148.52, 148.53, 148.77

Paperwork Reduction Act Statement: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0014. The estimated average time to complete this application is 45 minutes. U.S. Customs and Border Protection, Office of Regulations and Rulings, 10th floor, 90K Street NE., Washington DC 20229-1177.

PART I TO BE COMPLETE assistance. REMEMBERAll of 1. IMPORTER'S NAME (Last, I	first and middle initial)	io verificatio		The second of the	icles could	result in penal	lties.)
Bastian Burke			2. INPORTER'S	DATE OF BIRTH	3. IMF	PORTER'S DAT	E OF ARRIVA
4. IMPORTER'S U.S. ADDRESS			02.10.1982				
320 Miracle Mile, Ste 201			5. IMPORTER'S F	5. IMPORTER'S PORT OF ARRIVAL			
33143 Coral Gables Florida			Miami Internatio	Miami International Airport			
			<ol><li>NAME OF ARRIVING VESSEL CARRIER AND FLIGHT/TRAIN</li></ol>				
7. NAME(S) OF ACCOMPANYING HOUSEHOLD MEMBERS (wife, h		(wife buch	and at a live				
Ester Hinda Perets Burke - W	Vife	(wire, nusb	and, minor children, etc.)				
Emilia Hannah Burke - Daugi	hter, Nathan Shai Burke - Sor	n					
8. THE ARTICLES FOR WHICH A DATE		B. NAME OF VESSEL/CARRIER					
FREE ENTRY IS CLAIMED BELONG TO ME AND/OR M	×	J. INAI	IL OF VESSELICARRIER	C. FROM (Cou	ntry)	D. B/L OR A	AWB OR I.T. N
FAMILY AND WERE IMPORT	TED 1						
E. NUMBER AND KINDS OF CO	ONTAINERS	E MAD	IVO AND LUM				
		I. WAR	KS AND NUMBERS				
PART II - TO BE COMPLETED	BY ALL PERSONS EVOLET	II a b		ANNO META DICE			
PART II - TO BE COMPLETED  RESIDENCY ("X" appropriate		U.S. PERS	ONNEL AND EVACUEES	Savier and			22.00/2 <sub>3</sub> (1.75)
I declare that my place of resid	lence abroad D is D	1	A. NAME OF COUNTRY	T	B. LENG	TH OF TIME	
RESIDENCY STATUS UPON	MY/OUR ARRIVAL (IVE O	vas 🌹	Israel			Yr. 2020	Mo. Augu
- (1) Returning resident of the	halle (a) N F	_			Manufile	Carrier and Application Commence	The state of the s
0. STATEMENT(S) OF ELIGIBILI Applicable to RESIDENT at	he U.S. (2) Nonresident:	✓ a. Emig	grating to the U.S.	Visiting the U.S.			
Applicable to RESIDENT at	THE ENTRY OF ARTIC	CLES. I the	undersigned further declare t	hat ("Y" all applies	ble items		
(1) All household effects ac						The basine passing	IN HOLL.
Were used short-disac			C. Applicable to N	ONDECIDENTA			
	dance appose for Mulcu tree eu	ntry is sough		ONKESIDENI ()	MIY		
household of which I	equired abroad for which free en least one year by me or my fan	itry is sount	1	old effects again	NLY	a vara e	
nousehold of which I	The serie year by me of thy lan	ntry is sough	it (1) All househ	old effects acquire	NLY ed abroad	for which free	entry is sough
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household of which I or i period of use, and are no (9804.00.05, HTSUSA)	my family was a resident memb of intended for any other person	ntry is sough mily in a per during si n or for sale	(1) All househ were used household	old effects acquire abroad for at leas of which I or my for	NLY ed abroad it one year amily was	for which free or r by me or my fo	entry is sough amily in a
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D. LIST OF ARTICLES	NAMES AND ADDRESS OF THE PARTY		
(1) ITEM NUMBER			
CHECKED IN PART IV, A., B., C.	(2) DESCRIPTION OF MERCHANDI	ISE (3) VALUE COST ( REPAIR	OF TRIP: State where in the U.S. the foreign
	*		
		•	
		£.	
ART V CARRIER'S CERTII	FICATE AND RELEASE ORDER		
is the owner or consignee of	om of upon whose order the articles descri- such articles within the purview of section	ibed in PART I, 8., must b	ne released, hereby certifies that the person named in Part I,
accordance with provisions o NAME OF CARRIER	f section 484(h), Tariff Act of 1930, author	ity is hereby given to rele	asa tha autistic L
NAME OF CARRIER		2. SIGNATURE OF A	GENT (Print and sign)
RT VI CERTIFICATION TO	D BE COMPLETED BY ALL PERSONS S	Sign	Date
"X" One	confect and complete.	EEKING FREE ENTRY	
A. Authorized Agent* (From BIGNATURE (Sign in ink)	m facts obtained from the importer)	B. Importer	
i Le		ACTION AND ACTION ASSESSMENT	3. DATE 3rd August 2022
amilia / " gent is delined a	is a person who has actual knowledge of	he facts and whe i	
DADE: 19 CFR 141.19,	141.32, 141.33).	no racis and who is spec	fically empowered under a nower of attornation
PART VII - CBP USE ON (Inspected and Release		OFFICIAL (Sign in ink)	3rd August 2022  ifically empowered under a power of attorney to execute this  2. DATE

## POWER OF ATTORNEY - to clear my personal effects shipment through U.S. Customs

Section 141.5, Title 19, United States Code of Federal Regulations requires a Customs House Broker to obtain a valid Power of Attorney before transacting business in the name of his principal (Importer of Records).

Bastian Burke

To expedite clearance of your shipment and to comply with U.S. Customs regulations, please complete the information as requested below (X). KNOW ALL MEN BY THESE PRESENTS: That, (X)

and the second	320 Miracle Mile, Ste 201 (Full name of Shipper) 33143 Coral Gables
Residing at (X)	Florida
	(U.S. Address)
hereby constitutes	and appoints the following Customs House Broker:
transportation, or e which may be required grantor;  To make endorsem declare, or swear to manufacture, certificentry, declaration of	al agent and attorney of the grantor named above for and in the name, place, And stead of said grantor from this stoms Districts, and in no other name, to make, endorse, sign, declare, or swear to any entry, withdrawal, exportation of lading, carnet or other document required by law or regulation in connection with the importation, exportation of any merchandise shipped or consigned by or to said grantor; to perform any act or condition aired by law or regulation in connection with such merchandise; to receive any merchandise deliverable to said ments on bills of lading conferring authority to transfer title, make entry or collect drawback, and to make, sign, and it is an any statement, supplemental statement, schedule, supplemental schedule, certificate of delivery, certificate of manufacture and delivery, abstract of manufacturing records, declaration of proprietor on drawback ones, regardless of whether such bill of lading, sworn statement, schedule, certificate of by law or regulation
other affidavit or do	ocument is intended for filing in any customs district;
To sign, seal, and d withdrawal of impo entry, clearance, lac and any and all bon owner's declaration merchandise.	eliver for and as the act of said grantor any bond required by law or regulation in connection with the entry or or merchandise exported with or without benefit of drawback, or in connection with the ding, unlading or navigation of any vessel or other means of conveyance owned or operated by said grantor, ds which may be voluntarily given and accepted under applicable Laws and regulations, consignee's and s provided for in section 485, Tariff Act of 1930, as amended or affidavits in connection with the entry of
To sign and swear to with the entering, el grantor;	o any document and to perform any act that may be necessary or required by law or regulation in connection earing, lading, unlading, or operation of any vessel or other means of conveyance owned or operated by said
And generally to train of protests under second properly be transacted anything whatever retaifying and confirm attorney to remain in is duly given to and it power shall in no case.	insact at the customshouses in any district, any and all customs business, including making, signing, and filing action 514 of the Tariff Act of 1930, in which said grantor is or may be concerned or interested and which may be do or performed by an agent and attorney, giving to said agent and attorney full power and authority to do a concerned or interested and which may be equisite and necessary to be done in the premises as fully as said grantor could do if present and acting, hereby a full force and effect until the day of, or until notice of revocation in writing the have any force or effect after the expiration of 2 years from the date of its execution.
IN WITNESS WHER	REOF, the said (X) Bastian Burke
	(Full name of shipper)
has caused these pres	ents to be signed (X) $G$ $G$ DATE (X) 3rd August 2022
WITNESSED BY (X	
The second secon	(Witness name) (X)
	Witness Signature

# TREASURY DEPARTMENT U.S. CUSTOMS SERVICE SUPPLEMENTAL DECLARATION FOR UNACCOMPANIED PERSONAL AND HOUSEHOLD EFFECTS

Owner of Household Goods     (Last, first and middle)     Bastian Burke	
2. Date of Birth 2nd October 1982	3. Citizenship Israel, German
4. Passport (Country and Number)	3. Gilizerisnip Israel, German
5. Social Security No.  320 Miracle Mile, Ste 201  33143 Coral Gables Florida	6. Resident Alien No. L1 - Visa Number R8894802
8. Foreign Address	11. Position with Company Head of Business Development US
	12. Length of Employment Minimum 3 Years
Reason for Moving	13. Nature of Business Distribution of Baby Products
15. Name and Address of Freight Forwarders Packers and Shipping Agents	14. Name and Telephone of Company Official Who Can Verify Above Information  David Seguias - Cell Phone: 786 266 9829
16. Shipment Itinerary (specify place of loading and intermediate ports)	
17. Certification I, the undersigned, certify that this declaration is correct and cor  ☐ A. Authorized Agent (from facts obtained from the importer)  ☑ B. Importer	mplete
Signature	Date 3rd August 2022