

Shipper

SHAHAR MOSHE HAGAI
HARIMON 7
RISHON LE ZION

ISRAEL
Consignee

SKLAR THERESE
22575 GROUPE CT.
BOCA RATON FL 33428
U.S.A

Notify address

OMEGA RELOCATIONS INC
8373 NW 74 ST
MEDLEY, FL 33166
TEL: (305) 888-0337

Pre-carriage by: Omega-relocations.com Place of receipt by pre-carrier*

Vessel MSC MATILDE V429A HAIFA, ISRAEL Port of loading

Port of discharge NEW YORK Place of delivery by on carrier*

NEW YORK MIAMI, FL

Marks and Nos. Number and kind of packages; description of goods Gross weight Measurement

SHAHAR MOSHE 1 PACKAGE SLAC: 1 PKG USED 121.00 1.570
HAGAI HOUSEHOLD GOODS
HS CODE 9403.10

EXPRESS B/L

Copy for testing

LINER BILL OF LADING

COPY NON-NEGOTIABLE

SMRK 2048205
Reference No.

4023106

CUSTOMS & FORWARDING AGENCY

OSHFIR
IMPORT & EXPORT LTD

5, PAL-YAM ST., HAIFA 33095 ISRAEL
TEL. 04-8672270 FAX. 04-8641670

For delivery apply to:

SEAMAR FREIGHT INTERNATIONAL**
167-14 146 ROAD,
JAMAICA, NY 11434 USA
TEL: 718-5535333 FAX: 718-5530708

Particulars furnished by the Merchant

<p>Freight details, charges ets.</p> <p>Stuft. Cont. No. TGBU-354933-0 CFS</p>	<p>BILL OF LADING</p> <p>RECEIVED by the Carrier the Goods as specified above in apparent order and condition unless otherwise stated, to be transported to such place as agreed, authorised or permitted herein and subject to all the terms and conditions appearing on the front and reverse of this Bill of Lading to which the Merchant agrees by accepting this Bill of Lading, any local privileges and customs notwithstanding.</p> <p>The particulars given above as stated by the shipper and the weight, measure, quantity, conditions, contents and value of the Goods are unknown to the Carrier.</p> <p>In WITNESS, whereof one (1) original BILL of Lading has been signed it not otherwise stated hereafter, the same being accomplished the other(s), if any to be void, if required by the Carrier one (1) original Bill of Lading must be surrendered duly endorsed in exchange for the Goods or delivery order.</p> <p>The contract evidenced by or contained in this bill of Lading is governed by the law of Israel and any claim of dispute arising hereunder or on connection herewith shall be determined by the courts in Haifa and no other Courts.</p> <p>(Terms to continue on back hereof)</p> <p>Excess value declaration refer to clause 6 (4) (B) + (C) on reverse side.</p>
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<p>Shipped on board Date</p>	<p>Freight payable at Number of original Bs/L</p>	<p>Place and date issue Signature</p>
<p>25/07/24</p>	<p>PREPAID</p>	<p>25/07/24</p>

in here



בקבלך את הדרכון
התגוב כאן

amended - see page _____ שונה - ראה עמוד _____

PASSPORT

דרכון

STATE OF ISRAEL

מדינת ישראל

Type / סוג

P / ד

Code of State / סמל המדינה

ISR

Passport No. /

24695099

Surname

SKLAR

שם משפחה

סקלר

Given name

THERESE

שם פרטי

טרו

Nationality

ISRAELI

אזרחות

ישראלית

Date of birth / תאריך לידה

17/01/1951

I.D. No. / מס זהות

0-6981899-5

Sex / מין

F / נ

Place of birth

MOROCCO

מקום לידה

מרוקו

Date of issue / תאריך תוצאה

24/05/2024

Date of expiry / תאריך מוקטת חוקף

23/05/2029

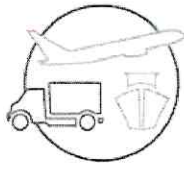
Authority - I.C. Passport at

MIAMI

זכות - ממונת דרכונים ב-

מיאמי





PACKING INVENTORY

Shipper Name: SHAHAR MOSHE HAGAI
Packing Job Date: 20 May 2024
Origin Address: Israel
Destination Address: United States



Packed Items

Package#	Item	Comment	Wrapping	Room
1	Buffet		Wrapped	-----

Total Number of Packages: 1

Used Boxes Count

Box Type	Quantity
Wrapped	1

Shipper Signature on packing

Shipper: SHAHAR MOSHE HAGAI

11 Jul 2024

Foreman Signature on packing

Foreman: Gil Wanderman || AUT

A. Univers Transit Ltd.

Shipper Signature on delivery

Name: _____

Date: _____

Delivery Driver Signature

Name: _____

Company: _____

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

1. Owner of Household Goods
(Last, first and middle) F SKLAR, THERESE

2. Date of Birth Jan 17, 1951 | 3. Citizenship USA

4. Passport (Country and Number) USA 663102700

5. Social Security No. 181-58-4457 | 6. Resident Alien No. _____

7. U.S. Address 22575 Grouper ct | 10. Employer _____
Boca Raton FL 33428

8. Foreign Address _____ | 11. Position with Company _____

9. Reason for Moving _____ | 12. Length of Employment _____

_____ | 13. Nature of Business _____

14. Name and Telephone of Company Official Who Can Verify
Above Information _____

15. Name and Address of Freight Forwarders
Packers and Shipping Agents _____

16. Shipment Itinerary
(specify place of loading and intermediate ports)

17. Certification
I, the undersigned, certify that this declaration is correct and complete

A. Authorized Agent (from facts obtained from the importer)

B. Importer

Signature Theres Sklar Date 3/6/24

PART IV - ARTICLES			
(1) NUMBER CHECKED PART IV, A, B, C.	(2) DESCRIPTION OF MERCHANDISE	(3) VALUE OR COST OF REPAIRS	(4) FOREIGN MERCHANDISE TAKEN ABROAD THIS TRIP: State where in the U.S. the foreign merchandise was acquired or when and where it was previously declared to CBP.

PART V - CARRIER'S CERTIFICATE AND RELEASE ORDER

The undersigned carrier, to whom of upon whose order the articles described in PART I, 8., must be released, hereby certifies that the person named in Part I, 1., is the owner or
signee of such articles within the purview of section 484(h), Tariff Act of 1930.

In accordance with the provisions of section 484(h), Tariff Act of 1930, authority is hereby given to release the articles to such consignee.

NAME OF CARRIER	2. SIGNATURE OF AGENT (Print and sign)	Date
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PART VI - CERTIFICATION TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY

The undersigned, certify that this declaration is correct and complete.

- One A. Authorized Agent* (From facts obtained from the importer) B. Importer

SIGNATURE <i>Theresa SKL</i>	3. DATE
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* An Authorized Agent is defined as a person who has actual knowledge of the facts and who is specifically empowered under a power of attorney to execute this declaration (see 19 CFR 141.10, 141.32, 141.33).

PART VII - CBP USE ONLY (Inspected and Released)	1. SIGNATURE OF CBP OFFICIAL	2. DATE
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CHECKED B. C.	(2) DESCRIPTION OF MERCHANDISE	QUANTITY OR COST OF REPAIRS	Any replacement or repairs to these articles THIS YEAR shall also include (3) damaged merchandise and amount of year used which is and properly included in 1957

BUYER'S CERTIFICATE AND RELEASE ORDER

I, the undersigned, hereby certify that the articles described in PART I, and the amount, hereby certified, that the goods covered in PART I, are the same as
articles within the provision of section 4092, Title Act of 1952.

The provisions of section 4092, Title Act of 1952, relating to liability shall apply to the articles in such category.

BUYER: _____ DATE: _____
SIGNATURE OF AGENT: _____ DATE: _____

INFORMATION TO BE COMPLETED BY ALL PERSONS SIGNING THIS ENTRY

Verify that the description is correct and complete.

I Agree: (Print full name of the insured) I Agree

U.S. DEPARTMENT OF HOMELAND SECURITY
Bureau of Customs and Border Protection

FORM APPROVED OMB NO. 1651-0014

DECLARATION FOR FREE ENTRY
OF UNACCOMPANIED ARTICLES

19 CFR 148.6, 148.52, 148.53, 148.77

PAPERWORK REDUCTION ACT NOTICE: This request is in accordance with the Paperwork Reduction Act. We ask for the information in order to carry out the laws and regulations administered by the CBP. These regulations and forms apply to importers to ensure that they are complying with the law and to allow us to figure, collect, or refund the right amount of duty and tax. It is mandatory. The estimated average burden associated with this collection of information is 10 minutes per respondent depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Bureau of Customs and Border Protection, Information Services Branch, Washington, DC 20229, and to the Office of Management and Budget, Paperwork Reduction Project (1651-0014), Washington, DC 20503.

PART I - TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY OF ARTICLES (Please consult with the CBP official for additional information or assistance. REMEMBER--All of your statements are subject to verification. False declarations or failure to declare articles could result in penalties.)

1. IMPORTER'S NAME (Last, first and middle) THERESE SKLAR		2. IMPORTER'S DATE OF BIRTH 1/17/1951	3. IMPORTER'S DATE OF ARRIVAL 5/14/2024
4. IMPORTER'S U.S. ADDRESS 22575 Grouper Ct. Boca Raton FL 33428		5. IMPORTER'S PORT OF ARRIVAL MIAMI, FL	
6. NAME OF ARRIVING VESSEL CARRIER AND FLIGHT/TRAIN SWISSAIR Run By United UA9808			
7. NAME(S) OF ACCOMPANYING HOUSEHOLD MEMBERS (wife, husband, minor children, etc.) [Signature]			

8. THE ARTICLES FOR WHICH FREE ENTRY IS CLAIMED BELONG TO ME AND/OR MY FAMILY AND WERE IMPORTED	A. DATE	B. NAME OF VESSEL/CARRIER	C. FROM (Country)	D. B/L OR A/WB OR I.T. NO.
9. NUMBER AND KINDS OF CONTAINERS	F. MARKS AND NUMBERS			

PART II - TO BE COMPLETED BY ALL PERSONS EXCEPT U.S. PERSONNEL AND EVACUEES

10. RESIDENCY (X appropriate box) I declare that my place of residence abroad <input checked="" type="checkbox"/> is <input type="checkbox"/> was	A. NAME OF COUNTRY USA	B. LENGTH OF TIME Yr. 46 Mo. 6
C. RESIDENCY STATUS UPON MY/OUR ARRIVAL (X One) <input checked="" type="checkbox"/> (1) Returning resident of the U.S. <input type="checkbox"/> (2) Nonresident: <input type="checkbox"/> a. Emigrating to the U.S. <input type="checkbox"/> b. Visiting the U.S.		

10. STATEMENT(S) OF ELIGIBILITY FOR FREE ENTRY OF ARTICLES
I, the undersigned further declare that ("X" all applicable items and submit packing list):

- | | |
|---|---|
| <p>A. Applicable to RESIDENT AND NONRESIDENT</p> <p><input checked="" type="checkbox"/> (1) All household effects acquired abroad for which free entry is sought were used abroad for at least one year by me or my family in a household of which I or my family was a resident member during such period of use, and are not intended for any other person or for sale. (9804.00.05, HTSUSA)</p> <p><input type="checkbox"/> (2) All instruments, implements, or tools of trade, occupation or employment, and all professional books for which free entry is sought were taken abroad by me or for my account or I am an emigrant who owned and used them abroad. (9804.00.10, 9804.00.15, HTSUSA)</p> <p>B. Applicable to RESIDENT ONLY</p> <p><input type="checkbox"/> All personal effects for which free entry is sought were taken abroad by me or for my account. (9804.00.45, HTSUSA)</p> | <p>C. Applicable to NONRESIDENT ONLY</p> <p><input type="checkbox"/> (1) All articles of apparel, personal adornment, toiletries and similar personal effects for which free entry is sought were actually owned by me and in the possession of myself, or those members of my family who accompanied me, at the time of departure to the United States and that they are appropriate and are intended for our personal use and not for any other person nor for sale. (9804.00.20 HTSUSA)</p> <p><input type="checkbox"/> (2) Any vehicles, trailers, bicycles or other means of conveyance being imported are for the transport of me and my family and such incidental carriage of articles as are appropriate to my personal use of the conveyance. (9804.00.35, HTSUSA)</p> |
|---|---|

PART III - TO BE COMPLETED BY U.S. PERSONNEL AND EVACUEES ONLY

I, the undersigned, the owner, importer, or agent of the importer of the personal and household effects for which free entry is claimed, hereby certify that they were in direct personal possession of the importer, or of a member of the importer's family residing with the importer, while abroad, and that they were imported into the United States because of the termination of assignment to extended duty (as defined in section 148.74(d) of the Customs Regulations) at a post or station outside the United States and the CBP Territory of the United States, or because of Government orders or instructions evacuating the importer to the United States, and that they are not imported for sale or for the account of any other person and that they do not include any alcoholic beverages or cigars. Free entry for these effects is claimed under Subheading No. 9805.00.50, Harmonized Tariff Schedule of the United States.

1. DATE OF IMPORTER'S LAST DEPARTURE FROM THE U.S.	2. A COPY OF THE IMPORTER'S TRAVEL ORDERS IS ATTACHED AND THE ORDERS WERE ISSUED ON:
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PART IV - TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY OF ARTICLES (Certain articles may be subject to duty and/or other requirements and must be specifically declared herein. Please check all applicable items and list them separately in item D on the reverse.)

- | | |
|--|--|
| <p>A. For U.S. Personnel, Evacuees, Residents and Non-Residents</p> <p><input type="checkbox"/> (1) Articles for the account of other persons.</p> <p><input type="checkbox"/> (2) Articles for sale or commercial use.</p> <p><input type="checkbox"/> (3) Firearms and/or ammunition.</p> <p><input type="checkbox"/> (4) Alcoholic articles of all types or tobacco products.</p> <p><input type="checkbox"/> (5) Fruits, plants, seeds, meats, or birds.</p> <p><input type="checkbox"/> (6) Fish, wildlife, animal products thereof.</p> | <p>B. For Residents and Non-Residents ONLY</p> <p><input type="checkbox"/> (7) Foreign household effects acquired abroad and used less than one year.</p> <p><input type="checkbox"/> (8) Foreign household effects acquired abroad and used more than one year.</p> <p>C. For Resident ONLY</p> <p><input type="checkbox"/> (9) Personal effects acquired abroad.</p> <p><input type="checkbox"/> (10) Foreign made articles acquired in the United States and taken abroad on this trip or acquired abroad on another trip that was previously declared to CBP.</p> <p><input type="checkbox"/> (11) Articles taken abroad for which alterations or repairs were performed abroad.</p> |
|--|--|

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

Owner of Household Goods
(Last, first and middle) SKLAR, THERESE

Date of Birth Jan 17, 1951 | 3. Citizenship USA

Passport (Country and Number) USA 663102700

Social Security No. 181-58-4457 | 6. Resident Alien No. _____

U.S. Address 22575 Grouper Ct
Ocala Raton Fl 33428 | 10. Employer _____

Foreign Address _____ | 11. Position with Company _____

Reason for Moving _____ | 12. Length of Employment _____

Foreign Address _____ | 13. Nature of Business _____

Reason for Moving _____ | 14. Name and Telephone of Company Official Who Can Verify
Above Information _____

Reason for Moving _____ | 14. Name and Telephone of Company Official Who Can Verify
Above Information _____

Reason for Moving _____ | 14. Name and Telephone of Company Official Who Can Verify
Above Information _____

5. Name and Address of Freight Forwarders
Packers and Shipping Agents _____

16. Shipment Itinerary
(specify place of loading and intermediate ports)

17. Certification
I, the undersigned, certify that this declaration is correct and complete

A. Authorized Agent (from facts obtained from the importer)

B. Importer

Signature Theres Sklar | Date 3/6/24

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).

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) TERESE SKLAR
(Full name of Shipper)

Residing at (X) 22575 Grouper ct. Boca Raton, Fl. 33428
(U.S. Address)

hereby constitutes and appoints the following Customs House Broker:

as a true and lawful agent and attorney of the grantor named above for and in the name, place, And stead of said grantor from this date and in all Customs Districts, and in no other name, to make, endorse, sign, declare, or swear to any entry, withdrawal, declaration, certificate, bill of lading, carnet or other document required by law or regulation in connection with the importation, transportation, or exportation of any merchandise shipped or consigned by or to said grantor; to perform any act or condition which may be required by law or regulation in connection with such merchandise; to receive any merchandise deliverable to said grantor;

To make endorsements on bills of lading conferring authority to transfer title, make entry or collect drawback, and to make, sign, declare, or swear to any statement, supplemental statement, schedule, supplemental schedule, certificate of delivery, certificate of manufacture, certificate of manufacture and delivery, abstract of manufacturing records, declaration of proprietor on drawback entry, declaration of exporter on drawback entry, or any other affidavit or document which may be required by law or regulation for drawback purposes, regardless of whether such bill of lading, sworn statement, schedule, certificate, abstract, declaration, or other affidavit or document is intended for filing in any customs district;

To sign, seal, and deliver for and as the act of said grantor any bond required by law or regulation in connection with the entry or withdrawal of imported merchandise or merchandise exported with or without benefit of drawback, or in connection with the entry, clearance, lading, unloading or navigation of any vessel or other means of conveyance owned or operated by said grantor, and any and all bonds which may be voluntarily given and accepted under applicable Laws and regulations, consignee's and owner's declarations provided for in section 485, Tariff Act of 1930, as amended or affidavits in connection with the entry of merchandise.

To sign and swear to any document and to perform any act that may be necessary or required by law or regulation in connection with the entering, clearing, lading, unloading, or operation of any vessel or other means of conveyance owned or operated by said grantor;

And generally to transact at the customshouses in any district, any and all customs business, including making, signing, and filing of protests under section 514 of the Tariff Act of 1930, in which said grantor is or may be concerned or interested and which may properly be transacted or performed by an agent and attorney, giving to said agent and attorney full power and authority to do anything whatever requisite and necessary to be done in the premises as fully as said grantor could do if present and acting, hereby ratifying and confirming all that the said agent and attorney shall lawfully do by virtue of these presents: the foregoing power of attorney to remain in full force and effect until the _____ day of _____, 2_____, or until notice of revocation in writing is duly given to and received by a District Director of Customs. If the donor of this power of attorney is a partnership, the said power shall in no case have any force or effect after the expiration of 2 years from the date of its execution.

IN WITNESS WHEREOF, the said (X) TERESE SKLAR
(Full name of shipper)

has caused these presents to be signed (X) Theresa Sklar DATE (X) 6/2/25
(Signature of Shipper)

WITNESSED BY (X) _____ (X) _____
(Witness name) Witness Signature