


**FILED**  
**Apr 14, 1999 8:00 am**  
**Secretary of State**

04-14-1999 90047 023 \*\*\*\*61.25

NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
<b>DOCUMENT # N38380</b> Corporation Name <b>HUSSEINI ISLAMIC CENTER OF FLORIDA, INC.</b>		
Principal Place of Business	Mailing Address	
5211 HESTER AVE SANFORD FL 32773 US	1125 BROWNSHIRE CT LONGWOOD FL 32779 US	

90047 - 90062 - 43



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	28	05/29/1990
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number
22	27	59-3131142
City & State	City & State	Applied For
23	28	Not Applicable
Zip	Country	5. Certificate of Status Desired <input type="checkbox"/>
24	29	\$8.75 Additional Fee Required
25	30	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>
		\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
G.M. DEWJI 1125 BROWNSHIRE CT LONGWOOD FL 32779		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	OP	1.1 TITLE	LIYAKAT FAZAL <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEWJI, G.M.	1.2 NAME	
STREET ADDRESS	1125 BROWNSHIRE CT	1.3 STREET ADDRESS	1114 GREENSTONE Blvd # 100
CITY-ST-ZIP	LONGWOOD FL 32779	1.4 CITY-ST-ZIP	HEATHROW FL 32746
TITLE	DT	2.1 TITLE	MEHMOOD MANJI <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZAIDI, MURTAZA	2.2 NAME	
STREET ADDRESS	1382 LAPALOMA CIR	2.3 STREET ADDRESS	800 ROSEWELL COVE
CITY-ST-ZIP	WINTER SPRINGS FL 32708	2.4 CITY-ST-ZIP	HEATHROW FL 32746
TITLE	DS	3.1 TITLE	RAZA DHANJI <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LADAK, ZULFIDAR	3.2 NAME	
STREET ADDRESS	323 NEEDLES TRAIL	3.3 STREET ADDRESS	614 Renaissance Pl. # 305
CITY-ST-ZIP	LONGWOOD FL 32779	3.4 CITY-ST-ZIP	ALHAMBRA SPRINGS FL 32714
TITLE	D	4.1 TITLE	
NAME	SYED MEHDI RIZVI	4.2 NAME	
STREET ADDRESS	70 OAK PARK CIRCLE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL 32953	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_ SIGNATURE RECORDED \_\_\_\_\_  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

CR2E037 (11/98)

Attachment to Form N38380

560226-90062-43  
N38380

**Husseini Islamic Center**

**Change of Directors:**

President

Mehboob Manji  
800 Rosewell Cove  
Heathrow Fl, 32746

Vice - President

Liyakat Fazal  
1114 Greenstone Blvd # 100  
Heathrow Fl, 32746

Secretary

Raza Dhanji  
614 Renaissance Pt # 305  
Altamonte Springs Fl, 32714