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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT

N95000002523 (7)

DARUL ULOOM FLORIDA, INC.

Principal Place of Business Mailing Address

FILED Apr 24 1997 8:00am Secretary of State



4710 W IRLO BRONSON MEMORIAL HWY KISSIMMEE FL 34746		4710 W IRLO BRONSON MEMORIAL HWY KISSIMMEE FL 34748-5325					
					3. Date Incorporated or Qualified 05/26/1995	3a. Date of Last Report 02/06/1996	
	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21 2350	OLD VINELAND PD	262350 OLD VI	NELP	IND B	b 59-3323166	Not Applicable	
Suite, Apt #	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	UMEE, FL	City & State 28 KISSIMME			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 347°		1	30 OS	iry CEOL		Yes No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	egistered Agent	
			8	Name			
Gasperoni, emil A. Jr. 505 wekiva springs road suite 800 Longwood Fl 32779			L		ddress (P.O. Box Number is Not Acceptal	ess (P.O. Box Number is Not Acceptable)	
			[6	33			
				City		FL 85 Zip Code	
11. Pursuant to office or reagent. Lar	o the provisions of Sections 617.050 egistered agent, or both, in the State in familiar with, and accept the obliga	2 and 617,1508, Florida Statut of Florida. Such change was a ations of, Section 617,0503, Flo	es, the abo authorized orida Statu	ove-named of by the corporates.	corporation submits this statement for the pration's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered	
SIGNATURE _							
	Signature, typed or printed name of registered age			Agent signature n	equired when reinstating)	DATE	
12. TiTLE	OFFICERS ANI	DELETE	13.	. Ti	ADDITIONS/CHANGES TO OFFI		
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	IQBAL, MOHAMMAD 4710 W IRLO BRONSON ME	MUDINI IMA		EET ADDRESS	350 OLD VINELAND	ROAL	
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I do nereby 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 eath; that I am an officer or director of the corporation or the receiver or business 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 propagation with an address.

SIGNATURE

NATURE AND THE CONTRINTED NAME OF SIGNING OFFICER OR DIRECT

Date

Daytime Phone # 0070084