

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000011139

FILED
Apr 12, 2012
Secretary of State

Entity Name: THE DURAND JIRGA, INC.

Current Principal Place of Business:

519 SW BAYSHORE BOULEVARD
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

519 SW BAYSHORE BOULEVARD
PORT ST. LUCIE, FL 34983

New Mailing Address:

FEI Number: 80-0726968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATEEN, SEDDIQUE M
519 SW BAYSHORE BOULEVARD
PORT ST. LUCIE, FL 34983 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D
Name: MATEEN, SEDDIQUE M
Address: 519 SW BAYSHORE BOULEVARD
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: D
Name: SEDDIQUE, SABRINA
Address: 2516 SOUTH 19TH STREET #210
City-St-Zip: FORT PIERCE, FL 34982

Title: D
Name: AURAKZAI, MUSTAFA
Address: 2516 SOUTH 19TH STREET #201
City-St-Zip: FORT PIERCE, FL 34982

Title: D
Name: TARIN, QASIM
Address: 6553 LAS POSITAS ROAD
City-St-Zip: LIVERMORE, CA 94551

Title: D
Name: SEDDIQUE, MARY
Address: 519 SW BAYSHORE BLVD
City-St-Zip: PORT ST LUCIE, FL 34983

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: SEDDIQUE MATEEN

D

04/12/2012

Electronic Signature of Signing Officer or Director

Date