

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000000552

**FILED**  
**Jun 20, 2020**  
**Secretary of State**  
**3052007061CC**

**Entity Name:** BANGLADESH-AMERICAN MULTI-CULTURAL ORGANIZATION, INC.

**Current Principal Place of Business:**

11603.ROCK LAKE TERR  
BOYNTON BEACH, FL 33473

**Current Mailing Address:**

11603 ROCK LAKE TERR  
BOYNTON BEACH, FL 33473

**FEI Number: 45-0594214**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SCHMIDT, DAVID W  
100 N.E. FIFTH AVENUE  
DELRAY BEACH, FL US

*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

**Officer/Director Detail :**

Title           PTD  
Name           HAROON, SARKER  
Address        11603 ROCK LAKE TERR.  
City-State-Zip: BOYNTON BEACH FL 33473

Title           D  
Name           HASAN, MAHMUD  
Address        11603 ROKE LAKE TERR.  
City-State-Zip: BOYNTON BEACH FL 33473

Title           D  
Name           CHOWURY, HADI  
Address        11603 ROKE LAKE TERR.  
City-State-Zip: BOYNTON BEACH FL 33473

Title           D  
Name           YASMIN, MAHMUD  
Address        11603 ROCK LAKE TERR.  
City-State-Zip: BOYNTON BCH FL 33473

Title           SD  
Name           HAROON, UPOHAR  
Address        11603.ROCK LAKE TERR  
City-State-Zip: BOYNTON BEACH FL 33473

*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: SARKER HAROON**

**PRESIDENT**

**06/20/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date