## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005948

Entity Name: RADIANT HANDS INC.

**Current Principal Place of Business:** 

13250 N 56TH STREET, SUITE 203 B

TAMPA, FL 33617-1167

## **Current Mailing Address:**

13250 N 56TH STREET, SUITE 203 B TAMPA, FL 33617-1167 US

FEI Number: 20-2966567 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SALEH, MAGDA E 20011 BEARS TRACK LANE TAMPA, FL 33647 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

FILED Jan 16, 2020

Secretary of State

1857232653CC

## Officer/Director Detail:

Title D Title D

NameHASSAN, HUMERANameKHAN, AMEENA DR.Address1321 NW 91 TERRACEAddress1649 LYNSFIELD CTCity-State-Zip:GAINSVILLE FL 32606City-State-Zip:LUTZ FL 33549

Title D Title F

Name SHALABY, AMANY MRS. Name SALEH, MAGDA E

Address 1089 HARMONY LANE Address 20011 BEARS TRACK LANE

City-State-Zip: CLERMONT FL 34711 City-State-Zip: TAMPA FL 33647

Title T Title DIRECTOR

Name KAYALI, OSAMA Name RAHIM, LAILAH A

Address 10542 BERMUDA ISLE DR Address 4580 SECRETARIAT ROW

City-State-Zip: TAMPA FL 33647 City-State-Zip: SPRING HILL FL 34609

Title D Title SECRETARY

Name KHAN, PATRICIA Name ABDULLAH, NAIMA

Address 3504 SW 1ST WAY Address 10738 BREAKING ROCKS DR.

City-State-Zip: GAINESVILLE FL 32601 City-State-Zip: TAMPA FL 33647

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: MAGDA SALEH PRESIDENT 01/16/2020