## **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000003249

Entity Name: MIDDLE EASTERN AMERICAN PROFESSIONALS

ASSOCIATION, INC.

**Current Principal Place of Business:** 

7721 SW 22 STREET MIAMI, FL 33155

**Current Mailing Address:** 

7721 SW 22 STREET MIAMI, FL 33155 US

FEI Number: 26-2391975 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COREY, DARLENE 6000 SW 30TH STREET MIAMI, FL 33155 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 May 01, 2013

**Secretary of State** 

CC6156760268

Officer/Director Detail:

Title D Title DIRECTOR

Name MNEIMNEH, ZIYAD Name ALKADRY, MOHAMAD

Address 8650 SW 67TH AVE, #1021 Address 11200 S.W. 8TH STREET, PCA 260A

City-State-Zip: MIAMI FL 33143 City-State-Zip: MIAMI FL 33199

Title DIRECTOR Title T, S. D.

Name HANNA, MICHAEL N. Name COREY, DARLENE

Address 600 N PINE ISLAND RD STE 400 Address 6000 SW 30TH STREET

City-State-Zip: PLANTATION FL 33324 City-State-Zip: MIAMI FL 33155

Title PRESIDENT Title DIRECTOR

NameZAKHARIA, TOUFICNameSHEHADEH, JALALAddress6000 SW 30TH STAddress305 S ANDREWS AVE STE 710

City-State-Zip: MIAMI FL 33155 City-State-Zip: FORT LAUDERDALE FL 33301

Title DIRECTOR
Name SAFA, NADIA

Address 2580 MAYFAIR LANE
City-State-Zip: WESTON FL 33327

SIGNATURE: DARLENE COREY

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.

Electronic Signature of Signing Officer/Director Detail

T.S.D.

05/01/2013

Date