

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000008773

**Entity Name:** NORTH MIAMI ISLAMIC CENTER, INC.

**Current Principal Place of Business:**

560 NW 165TH. STREET ROAD  
MIAMI, FL 33169

**Current Mailing Address:**

560 NW 165TH. STREET ROAD  
MIAMI, FL 33169 US

**FEI Number: 27-3520946**

**Certificate of Status Desired: Yes**

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

MOHAMED, SHAZAM  
486 NW 165TH. STREET ROAD  
B 105  
MIAMI, FL 33169 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 P, D  
Name MOHAMED, SHAZAM  
Address 486 NW 165TH. STREET ROAD  
B 105  
City-State-Zip: MIAMI FL 33169

Title VP,D  
Name LYMOURI, MUSTAPHA  
Address 600 NE 195 ST.  
City-State-Zip: MIAMI FL 33179

Title T  
Name OSMAN, BUSHRA  
Address 2064 NE 167TH. STREET  
#2  
City-State-Zip: NORTH MIAMI BEACH FL 33162

*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: SHAZAM MOHAMED**

**P.D.**

**01/17/2017**

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

\_\_\_\_\_  
Date