

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003028

Entity Name: MUSLIM CEMETERY OF CENTRAL FLORIDA, INC.**Current Principal Place of Business:**4870 OLD TAMPA HWY
KISSIMMEE, FL 34758**Current Mailing Address:**4870 OLD TAMPA HWY
KISSIMMEE, FL 34758 US**FEI Number:** 45-1067986**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HAQUE, AMIN
7232 W SAND LAKE ROAD
102
ORLANDO, FL 32819 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 VP
Name SADAT, GOLAM N
Address 2881 OCONNELL DRIVE
City-State-Zip: KISSIMMEE FL 34741

Title SEC
Name AL-SAYEED, KAISAR
Address 2500 PARADISE CIRCLE
City-State-Zip: KISSIMMEE FL 34741

Title VP
Name ALI, KUDRAT
Address 8519 FOREST RUN LANE
City-State-Zip: ORLANDO FL 32836

Title DIRECTOR
Name AHMAD, SAEED
Address 1520 N. JOHN YOUNG PKWY.
City-State-Zip: KISSIMMEE FL 34741

Title PRESIDENT
Name HASSOUNEH, JAMAL
Address 1569 CARRINGTON AVENUE
City-State-Zip: WINTER SPRINGS FL 32708

Title TR
Name HAQUE, AMIN
Address 2852 O'CONNELL DRIVE
City-State-Zip: KISSIMMEE FL 34741

Title ASST. TREASURER
Name IQBAL, MOHAMMAD
Address 2861 PAIGE DR
City-State-Zip: KISSIMMEE FL 34741

Title ASST. TREASURER
Name ISLAM, HUZZATUL
Address 2769 TROPICAL LAKE DR
City-State-Zip: KISSIMMEE FL 34741

Continues on page 2

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: AMIN HAQUE

TREASURER

02/05/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	ABDARI, MOHAMED
Address	4870 OLD TAMPA HWY
City-State-Zip:	KISSIMMEE FL 34758