

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000008125

**FILED**  
**Apr 27, 2018**  
**Secretary of State**  
**CC0443897568**

**Entity Name:** BANGLADESHI AMERICAN SOCIETY OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

13056 VALEWOOD DRIVE  
NAPLES, FL 34119

**Current Mailing Address:**

PO BOX 101297  
CAPE CORAL, FL 33910 US

**FEI Number: 46-1093012**

**Certificate of Status Desired: No**

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

RAHMAN, MOHAMMAD M  
13056 VALEWOOD DRIVE  
NAPLES, FL 34119 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: MOHAMMAD RAHMAN**

**04/27/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           RAHMAN, M FAZLUR  
Address        7916 HARMONY LAKE CT  
City-State-Zip: FORT MYERS FL 34907

Title           SECRETARY  
Name           SYED, SAMIR B  
Address        9602 BLUE STONE CIR  
City-State-Zip: FORT MYERS FL 33913

Title           TREASURER  
Name           HOSSAIN, MOHAMMAD D  
Address        3309 MAGNOLIA LANDING LANE  
City-State-Zip: NORTH FORT MYERS FL 33917

Title           CULTURAL SECRETARY  
Name           KAR, SHIKHA  
Address        3466 MALAGROTTA CIRCLE  
City-State-Zip: CAPE CORAL FL 33909

Title           MEMBER AT LARGE  
Name           ISLAM, AMIRUL  
Address        2506 ASHBURY CIR  
City-State-Zip: CAPE CORAL FL 33991

Title           BOARD OF DIRECTORS  
Name           HOQUE, MOHAMMED A  
Address        9854 COLONIAL WALK SOUTH  
City-State-Zip: ESTERO FL 33928

Title           BOARD OF DIRECTOR  
Name           RAHMAN, MOHAMMAD M  
Address        13056 VALEWOOD DRIVE  
City-State-Zip: NAPLES FL 34119

Title           BOARD OF DIRECTOR  
Name           ROY, AMIT  
Address        LAGUNA LAKES  
City-State-Zip: FORT MYERS FL 33908

**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: M FAZLUR RAHMAN**

**PRESIDENT**

**04/27/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title BOARD OF DIRECTOR  
Name HOSSAIN, KAZI M  
Address 5357 HAWKS LANDING  
City-State-Zip: FORT MYERS FL 33907

Title BOARD OF DIRECTOR  
Name AHMED, TAMANNA A  
Address PO BOX 101297  
City-State-Zip: CAPE CORAL FL 33910