

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000003228

FILED
Mar 24, 2016
Secretary of State
CC9404502973

Entity Name: BANGLADESH CULTURAL - ORGANIZATION - OF MIAMI INC.

Current Principal Place of Business:

521 N.E. 177TH STREET
N. MIAMI BEACH, FL 33162

Current Mailing Address:

521 N.E. 177TH STREET
N. MIAMI BEACH, FL 33162

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZAMAN, MOHAMMAD
521 N.E. 177TH STREET
N. MIAMI BEACH, FL 33162 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 D
Name MOHAMMAD, ZAMAN
Address 521 N.E. 177TH STREET
City-State-Zip: N. MIAMI BEACH FL 33162

Title D
Name NADIM, BHUYAN
Address 521 N.E. 177TH STREET
City-State-Zip: N. MIAMI BEACH FL 33162

Title V
Name NAZMUL, HUDA
Address 17690 NE 5TH CT.
City-State-Zip: N. MIAMI BEACH FL 33162

Title D
Name AHM, KHAN A
Address 6901 SW 13TH ST.
City-State-Zip: PEMBROKE PINES FL 33023

Title D
Name ABUL, HASEB
Address 1460 NE 137TH ST.
City-State-Zip: N. MIAMI BEACH FL 33162

Title D
Name MOHAMMED, ALAM A
Address 933 SOUTH DIXIE HWY
City-State-Zip: POMPANO BCH FL 33060

Title DIRECTOR
Name ABU, BAKKAR IDRIS
Address 18100 ATLANTIC BLVD
209
City-State-Zip: N MIAMI BCH FL 33160

Title DIRECTOR
Name MOHAMMAD, DIDARUL ALAM
Address 1920 SW 4TH AVE
2
City-State-Zip: FT LAUDERDALE FL 33315

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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: MOHAMMAD ZAMAN

PRESIDENT

03/24/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MOHAMMAD , SOHID
Address 11420 CORAL BAY DR
City-State-Zip: BOCA RATON FL 33498