

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000007042

**Entity Name:** FRIENDS OF NILE UNIVERSITY, INC.**Current Principal Place of Business:**7454 SW 48TH STREET  
MIAMI, FL 33155**Current Mailing Address:**7454 SW 48TH STREET  
MIAMI, FL 33155 US**FEI Number:** 47-4595698**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VALENCIA REGISTERED SERVICES, LLC  
75 VALENCIA AVENUE  
FOURTH FLOOR  
CORAL GABLES, FL 33134 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
Name	ZAKI, AHMED
Address	7454 SW 48 STREET
City-State-Zip:	MIAMI FL 33155

Title	D
Name	EL GAMAL, HESHAM
Address	5212 BRANDO WAY COURT
City-State-Zip:	DUBLIN OH 43017

Title	D
Name	SHERIF, HASHEM
Address	60 BEAUMONT COURT
City-State-Zip:	TINTON FALLS NJ 07724

Title	D
Name	OSMAN, NAEL
Address	115 ROUNDTOP ROAD
City-State-Zip:	CARY NC 27519

Title	VP
Name	MOHAMED WALEED, FAHMY
Address	7454 SW 48TH STREET
City-State-Zip:	MIAMI FL 33155

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:** AHMED ZAKI

PRESIDENT

04/29/2020

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