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: IMRAN LAKHA

Electronic Signature of Signing Officer/Director Detail

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: IMRAN PIRMOHAMED 01/10/2017

SIGNATORE				01/10/2017
	Electronic Signature of Registered Agent			Date
Officer/Direc	tor Detail :			
Title	CFO	Title	PRESIDENT	
Name	LAKHA, IMRAN K	Name	WALLI, INAYAT A	
Address	5377 VIA APPIA WAY	Address	375 BAYMOOR WAY	
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	LAKE MARY FL 32746	
<b>T</b> '4.	ND.			
Title	VP			
Name	SOMJI, ZUHERHUSEIN M			

Name Address

Name and Address of Current Registered Agent:

122 ROSE HILL TRL

City-State-Zip: SANFORD FL 32773

PIRMOHAMED, IMRAN

# 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# N38380

Entity Name: HUSSEINI ISLAMIC CENTER OF FLORIDA, INC.

## **Current Principal Place of Business:**

5211 HESTER AVE SANFORD, FL 32773

### **Current Mailing Address:**

5211 HESTER AVE SANFORD, FL 32773 US

### FEI Number: 59-3131142

268 MAGNOLIA PARK TRL SANFORD, FL 32773 US

Jan 10, 2017
Secretary of State
CC8194495403

FILED

Certificate of Status Desired: Yes

01/10/2017 Date

CFO