## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#712767**

City-St-Zip:

MIAMI, FL

FILED Jan 15, 2004 Secretary of State

Entity Na	me: MASJID <i>i</i>	AL-ANSAR, INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
5245 NOR MIAMI, FL	RTHWEST 7TH 33127	AVENUE				
Current Mailing Address:			New Mailing Address:			
5245 NOR MIAMI, FL	RTHWEST 7TH 33127	AVENUE				
FEI Number	: 59-1742787	FEI Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desired (X)	
Name and	d Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
SABIR, NA 5245 N. W MIAMI, FL	1. 7 AVENUE					
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing i	ts registered o	office or registered agent, or both,	
SIGNATU	RE:					
	Electror	nic Signature of Registered Age	ent	Date		
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	S SABIR, NASHII 5245 NW 7 A MIAMI, FL 331	VE	Title: Name: Address: City-St-Zip:	(	) Change()Addition	
Title: Name: Address: City-St-Zip:	DT ( ) SALIM, HASAN 4122 NW 11 C MIAMI, FL		Title: Name: Address: City-St-Zip:	DP (XAHMED, NASII 5245 N.W 7 AV MIAMI, FL 33	VENUE	
Title: Name: Address: City-St-Zip:	DP ( ) NURIDDIN, FRI 1740 N W 189 MIAMI, FL		Title: Name: Address: City-St-Zip:	DV (X NURIDDIN, FR 1740 N W 189 MIAMI, FL		
Title: Name: Address: City-St-Zip:	DV () SALAHUDDIN, 5245 NW 7 AVI MIAMI, FL 331	<u>=</u>	Title: Name: Address: City-St-Zip:			
Title: Name: Address:	D (X ASAD, TARIQ 18610 N.W. 28	) Delete TH PL.	Title: Name: Address:	(	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: NASIR AHMED DP 01/15/2004