2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2005
Secretary of State

DOCUMENT# 712767

Entity Name: MASJID AL-ANSAR, INC.

Current Principal Place of Business:

5245 NORTHWEST 7TH AVENUE
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

5245 NORTHWEST 7TH AVENUE
MIAMI, FL 33127

New Mailing Address:

FEI Number: 59-1742787 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SABIR, NASHID
5245 N. W. 7 AVENUE
MIAMI, FL 33127 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: SABIR, NASHID
Address: 5245 NW 7 AVE
City-St-Zip: MIAMI, FL 33127

Title: DP ( ) Delete
Name: AHMED, NASIR IMAM
Address: 5245 N.W 7 AVENUE
City-St-Zip: MIAMI, FL 33127

Title: DV ( ) Delete
Name: NURIDDIN, FRED A. IMAM
Address: 1740 N W 189 TERR
City-St-Zip: MIAMI, FL

Title: DV ( ) Delete
Name: MUSTAFA, MELTON A. IMAM
Address: 5245 NW 7 AVE
City-St-Zip: MIAMI, FL 33127

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T ( ) Change (X) Addition
Name: MARUF, THOMAS J TREASUR
Address: 820 N E 159 ST
City-St-Zip: MIAMI, FL 33162

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.

SIGNATURE: DR.NASIR AHMAD DP 02/05/2005

Electronic Signature of Signing Officer or Director — Date