2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

City-St-Zip:

Title:

Name:

Address: City-St-Zip:

FILED May 01, 2005

DOCUMENT# 732767 Secretary of State Entity Name: KAZAH TEMPLE #149 OF MIAMI, FLORIDA -- A. E. A. O. N. M. S. OF N. AND S. AMERICA AND ITS JURIDICTION, INC. **Current Principal Place of Business: New Principal Place of Business:** KAZAH #149 500 FISHERMAN ST CAROL CITY, FL 33055 **Current Mailing Address: New Mailing Address:** P.O. BOX 2515 CAROL CITY, FL 33055 FEI Number: 59-6544122 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ELLIS, JOSEPH 2290 NW 107TH ST MIAMI, FL 33169 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SANDERS, RODNEY Name: Name: Address: P.O. BOX 54-6404 Address: City-St-Zip: SURFSIDE, FL 33154 City-St-Zip: Title: () Delete Title: () Change () Addition GORDON, MCARTHUR Name: Name: Address: 4610 S.W. 21ST ST Address: City-St-Zip: HOLLYWOOD, FL 33023 City-St-Zip: Title: () Delete Title: () Change () Addition WALKER, KENNETH Name: Name: 20840 NW 17TH AVE APT B Address: Address: City-St-Zip: CARD CITY, FL 33054 City-St-Zip: Title: () Delete Title: () Change () Addition WORTHEY, THEODIS Name: Name: 17700 NW 14 COURT Address: Address: MIAMI, FL 33055

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:

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: KENNETH WALKER SD 05/01/2005

() Delete

19320 WHISPERING PLACID ROAD

RODRIGUEZ, STEVE

MIAMI, FL 33157

() Change () Addition