2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#733706

Entity Name: ISLAMIC SOCIETY OF CENTRAL FLORIDA, INC.

FILED Apr 25, 2002 8:00 AM Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
	LDENROD RD , FL 32807 l	JS				
Current Mailing Address:				New Mailing Address:		
PO BOX 338 GOLDENROD, FL 327337338 US				PO BOX 338 GOLDENROD, FL 32733 US		
FEI Number: 51-0188054 FEI Number Applied For () FEI Nu			FEI Nun	mber Not Applicable () Certificate of Status Desired (X)		
Name and Address of Current Registered Agent: Nam					Address of Ne	w Registered Agent:
MURSI, MUHAMMAD 1089 N. GOLDENROD RD. ORLANDO, FL 32807 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.						
SIGNATUR)F.					
Electronic Signature of Registered Agent						Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title:	MUSRI, MUHAMI 1089 N. GOLDEN ORLANDO, FL 3	IROD RD.		Title: Name: Address: City-St-Zip: Title:	, ,	Change () Addition Change () Addition
Name: Address: City-St-Zip:	MANSORI, ZUBA 915 SEMORAN B CASSELBERRY,	IR ILVD.		Name: Address: City-St-Zip:	GIBBS, W. ERNE 3378 HILLMONT ORLANDO, FL 33	ST CIR.
Title: Name: Address: City-St-Zip:	D () E QADRI, SYED M 1003 BRIGHTWA MAITLAND, FL 3			Title: Name: Address: City-St-Zip:	TD (X) C MANSORI, ZUBAI 863 CYNTHIANNA ALTAMONTE SPE	A CIR.
Title: Name: Address: City-St-Zip:	D ()E ABDUL-LATIF, KA 8008 COTE CT ORLANDO, FL 3			Title: Name: Address: City-St-Zip:	D (X) C KASU, ABDULTIF 8008 COTE CT ORLANDO, FL 33	
Title: Name: Address: City-St-Zip:	D () E FAROUK, ADAM 1221 RICHMOOR ORLANDO, FL 3			Title: Name: Address: City-St-Zip:	D (X) C THAKUR, MURAD 5480 CURRY FO ORLANDO, FL 33	RD ROAD
Title: Name: Address: City-St-Zip:	D () E ZAMAN, AHMADI 412 BARCLAY C ALTAMONTE SPO	Г		Title: Name: Address: City-St-Zip:	() 0	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.

SIGNATURE: MUHAMMAD MUSRI P 04/25/2002