

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1996 08:00 AM
Secretary of State

DOCUMENT # 737272 (5)

1. Corporation Name

PAK - AMERICAN ISLAMIC CULTURAL CORPORATION, INC



Principal Place of Business

Mailing Address

995 HWY. 77 SOUTH
P.O. BOX 606
CHIPLEY FL 32428

995 HWY. 77 SOUTH
P.O. BOX 606
CHIPLEY FL 32428

3. Date Incorporated or Qualified
11/12/1976

3a. Date of Last Report
05/25/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number
59-1711376

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZAFAR, MUHAMMAD I.
995 HWY. 77 SOUTH
CHIPLEY FL 32428

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME ILYAS, SHEIKH
STREET ADDRESS 1309 GRACE AVE
CITY - ST - ZIP CHIPLEY FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE PD ☒ DELETE
NAME MOHAMMAD, ANEES
STREET ADDRESS 498 N WILSON ST
CITY - ST - ZIP CHIPLEY FL

2.1 TITLE Director & president ☒ Change ☐ Addition
2.2 NAME A. B. MIR
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE SD ☐ DELETE
NAME ZAFAR, MUHAMMAD I
STREET ADDRESS 995 HWY 77 S
CITY - ST - ZIP CHIPLEY FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE VD ☒ DELETE
NAME ISMAIL, TARIO
STREET ADDRESS 995 HWY. 77
CITY - ST - ZIP CHIPLEY FL

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME Muhammad M.
4.3 STREET ADDRESS Siddiqui 12765 - Roseland Rd.
4.4 CITY - ST - ZIP Sebastian FL 32958

TITLE D ☒ DELETE
NAME MUHAMMAD, WAHEED
STREET ADDRESS P.O. BOX 6, NA
CITY - ST - ZIP CHIPLEY FL

5.1 TITLE T. Hussain - D. ☒ Change ☐ Addition
5.2 NAME Roseland FL
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE D ☐ DELETE
NAME MUHAMMAD, AMIN
STREET ADDRESS 420 E. BIRD AVE.
CITY - ST - ZIP BONIFAY FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MUHAMMAD I ZAFAR 4-23-96 904 63 87623

CR2E037 (12/95)