2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#766686

FILED Feb 02, 2009 Secretary of State

Entity Name: NUR-UL-ISLAM OF SOUTH FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

10600 SW 59TH STREET COOPERCITY, FL 33328 US

Current Mailing Address: New Mailing Address:

10600 SW 59TH STREET FT LAUDERDALE, FL 33328 US

FEI Number: 59-2366188 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALLY, ASGAR SAHADAT, ZAID 10600 SW 59TH ST 10600 SW 59TH ST

FT LAUDERDALE, FL 33328 US FT LAUDERDALE, FL 33328 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.

SIGNATURE: ZAID SAHADAT 02/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 KHAN, HUSMAN DR.
 Name:
 ALLY, ASGAR

 Address:
 11550 NW 20TH STREET
 Address:
 10600 SW 59TH ST

City-St-Zip: PLANTATION ACRES, FL 33323 City-St-Zip: FT. LAUDERDALE, FL 33328

Title: VPD () Delete Title: SEC (X) Change () Addition Name: KHAN, NADEER Name: SAHADAT, ZAID

 Address:
 15984 W STATE RD 84
 Address:
 10600 SW 59TH ST

 City-St-Zip:
 DAVIE, FL 33326
 City-St-Zip:
 FT. LAUDERDALE, FL 33328

Title: TD () Delete Title: TD (X) Change () Addition Name: KARIM, MOHAMED Name: KARIM, MOHAMED

Address: 10260 SW 24TH COURT Address: 10600 SW 59TH ST

City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: FT. LAUDERDALE,, FL 33328

Title: SD (X) Delete Title: () Change () Addition
Name: ALLY, ASGAR Name:

 Name:
 ALLY, ASGAR
 Name:

 Address:
 5731 SW 88TH TERRACE
 Address:

 City-St-Zip:
 COOPER CITY, FL 33328
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ASGAR ALLY PRES 02/02/2009