

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 05, 2009
Secretary of State**

DOCUMENT# F08000005411

Entity Name: THE FSA FOUNDATION, INC.

Current Principal Place of Business:

101 MARTIN ST.
BERGENFFIELD, NJ 07621

New Principal Place of Business:

Current Mailing Address:

7890 SW 57TH TERR.
MIAMI, FL 33143

New Mailing Address:

FEI Number: 20-1659488 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AMJAD, ARSHAD H
7890 SW 57TH TERR.
MIAMI, FL 33143 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: PC () Delete
Name: AMJAD, ARSHAD H
Address: 7890 SW 57TH TERR.
City-St-Zip: MIAMI, FL 33143

Title: VCV () Delete
Name: AMJAD, SHAHNAZ
Address: 7890 SW 57TH TERR.
City-St-Zip: MIAMI, FL 33143

Title: SD () Delete
Name: AMJAD, AYISHA A
Address: 71 OCEAN PKWY.
City-St-Zip: BROOKLYN, NY 11218

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:

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: ARSHAD H. AMJAD, M.D.

PRES

03/05/2009

Electronic Signature of Signing Officer or Director

_____ Date