

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F93000003109

**FILED**  
**Jan 15, 2011**  
**Secretary of State**

**Entity Name:** MAKTAB TARIGHAT OVEYSSI SHAHMAGHSOUDI (SCHOOL OF ISLAMIC SUFISM) CORPORATION

**Current Principal Place of Business:**

18011 SHERMAN WAY  
RESEDA, CA 91335 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 19306  
ENCINO, CA 914166306 US

**New Mailing Address:**

**FEI Number:** 94-2495240

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAITEGAR, AFSANEH  
9929 BAYVISTA ESTATE BLVD  
ORLANDO, FL 32836 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: P  
Name: HAMID, RAHBARI  
Address: 239 WESTHEATH ROAD  
City-St-Zip: LONDON, UK NW3-7UB

Title: VPCT  
Name: KHOROMI, FARNAZ  
Address: 5141 RENAISSANCE AVE  
City-St-Zip: SAN DIEGO, CA 92122

Title: ST  
Name: MOTTAGHI, ALIREZA  
Address: 4084 CRYSTAL DAWN LN. #105  
City-St-Zip: SAN DIEGO, CA 92122

Title: ATT  
Name: SHARIFPOUR BAVAR, MAHIN  
Address: 2745 TENNYSON ST.  
City-St-Zip: THOUSAND OAKS, CA 91360

I hereby 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 all other like empowered.

SIGNATURE: ALIREZA MOTTAGHI

ST

01/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date