

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000141

FILED
Apr 28, 2009
Secretary of State

Entity Name: SALAAM INSTITUTE, INC.

Current Principal Place of Business:

266 NW 26TH STREET
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

266 NW 26TH STREET
MIAMI, FL 33127

New Mailing Address:

FEI Number: 65-0907148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KURATIBISHA X ALI RASHID
266 NW 26TH STREET
MIAMI, FL 33127 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: PD () Delete
Name: KURATIBISHA X ALI RASHID
Address: 266 NW 26TH STREET
City-St-Zip: MIAMI, FL 33127

Title: VSD () Delete
Name: RASHID, ISMAILIA A
Address: 266 NW 26TH STREET
City-St-Zip: MIAMI, FL 33127

Title: TD () Delete
Name: BRUNT, SAMUEL J
Address: 149 WEST PLAZA, SUITE 210
City-St-Zip: MIAMI, FL 33147

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: KURATIBISHA X ALI RASHID

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date