

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004257

FILED
Jan 20, 2009
Secretary of State

Entity Name: TAMPA BAY MUSLIM ALLIANCE, INC.

Current Principal Place of Business:

500 VONDERBURG DR
203E
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

500 VONDERBURG DR
203E
BRANDON, FL 33511

New Mailing Address:

FEI Number: 59-3393623

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAGMIA, HUSAIN
500 VONDERBERG DR
SUITE 203E
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

NAGAMIA, HUSAIN
500 VONDERBERG DR
SUITE 203E
BRANDON, FL 33511 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: HUSAIN NAGAMIA

01/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HUSAIN, NAGAMIA F MD
Address: 500 VONDERBERG DR. #203E
City-St-Zip: BRANDON, FL 33511

Title: VP () Delete
Name: AQUIL, HAKIM
Address: 2129 MARTIN LUTHER KING JR. BLVD.
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: BUKHARI, ALTAF
Address: 2204 IVY LANE
City-St-Zip: TAMPA, FL 33618

Title: D () Delete
Name: EL-AMIN, JARVIS
Address: 11305 N 51ST ST
City-St-Zip: TAMPA, FL 33617

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:

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: HUSAIN NAGAMIA

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date