2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0000005035

Name:

Address:

City-St-Zip:

MORRISON, SABRINA

MIAMI, FL 33127

C/O 5600 NW 7TH AVENUE

FILED Nov 02, 2006 Secretary of State

Entity Name: MUHAMMAD MOSQUE NO. 29, INC.				
Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
5600 N.W. MIAMI, FL	7TH AVENUE 33127			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
5600 N.W. MIAMI, FL	7TH AVENUE 33127			
	ce with s. 607.193(2)(b), F.S., the corporation di	•	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent	: Name and Address of N	lew Registered Agent:	
	AD, PATRICK 7TH AVENUE 33127 US			
	named entity submits this statement for the of Florida.	he purpose of changing its registered o	ffice or registered agent, or both,	
SIGNATUR	RE: MAURICE MCCLAIN			
	Electronic Signature of Registered	Agent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VPD () Delete MUHAMMAD, SAMEER C/O 5600 N.W. 7TH AVENUE MIAMI, FL 33127	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	STD () Delete MCCLAIN, MAURICE C/O 5600 N.W. 7TH AVENUE MIAMI, FL 33127	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () Delete MUHAMMAD, PATRICK 5600 N.W. 7TH AVENUE MIAMI, FL 33127	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	PD () Delete MUHAMMAD, RASUL H C/O 5600 NW 7TH AVENUE MIAMI, FL 33127	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title:	VP () Delete	Title: ()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MAURICE STD 11/02/2006