2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# N00000005035

Entity Name: MUHAMMAD MOSQUE NO. 29, INC.

Current Principal Place of Business:

5600 N.W. 7TH AVENUE
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

5600 N.W. 7TH AVENUE
MIAMI, FL 33127

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MUHAMMAD, PATRICK
5600 N.W. 7TH AVENUE
MIAMI, FL 33127 US

Name and Address of New Registered Agent:

MCCLAIN, MAURICE D STD
5600 N.W. 7TH AVENUE
MIAMI, FL 33127 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: MAURICE D. MCCLAIN 04/24/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete
Name: MUHAMMAD, SAMEER
Address: C/O 5600 N.W. 7TH AVENUE
City-St-Zip: MIAMI, FL 33127

Title: STD ( ) Delete
Name: MCCLAIN, MAURICE
Address: C/O 5600 N.W. 7TH AVENUE
City-St-Zip: MIAMI, FL 33127

Title: VPD ( ) Delete
Name: MUHAMMAD, PATRICK
Address: 5600 N.W. 7TH AVENUE
City-St-Zip: MIAMI, FL 33127

Title: PD ( ) Delete
Name: MUHAMMAD, RASUL H
Address: C/O 5600 NW 7TH AVENUE
City-St-Zip: MIAMI, FL 33127

Title: VP ( ) Delete
Name: MORRISON, SABRINA
Address: C/O 5600 NW 7TH AVENUE
City-St-Zip: MIAMI, FL 33127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: JOHNSON, AL
Address: C/O 5600 N.W. 7TH AVENUE
City-St-Zip: MIAMI, FL 33127

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: MUHAMMAD, SANDY
Address: 5600 N.W. 7TH AVENUE
City-St-Zip: MIAMI, FL 33127

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: MAURICE D. MCCLAIN STD 04/24/2009
Electronic Signature of Signing Officer or Director Date