

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000006956

**FILED**  
**Feb 09, 2004**  
**Secretary of State****Entity Name:** ALLIANCE FOR COMMUNITY EXCELLENCE, INC.**Current Principal Place of Business:**1751 NW 5TH AVENUE  
POMPAN0 BEACH, FL 33060**New Principal Place of Business:****Current Mailing Address:**1751 NW 5TH AVENUE  
POMPAN0 BEACH, FL 33060**New Mailing Address:****FEI Number:** 65-1068277**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SABIR, NASHID  
18350 NW 2ND AVENUE  
SUITE 500  
MIAMI, FL 33169 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:** CHRD ( ) Delete  
**Name:** RASHEED, RAYMOND N  
**Address:** 1751 NW 5TH AVENUE  
**City-St-Zip:** POMPAN0 BEACH, FL 33060**Title:** D ( ) Delete  
**Name:** HAMIN, MIKAL T  
**Address:** 1211 N.W. 29TH WAY  
**City-St-Zip:** FORT LAUDERDALE, FL 33311**Title:** TD ( ) Delete  
**Name:** HAMIN, AFRAH J  
**Address:** 1211 29TH WAY  
**City-St-Zip:** FORT LAUDERDALE, FL 33311**Title:** SD ( ) Delete  
**Name:** MATEEN, MALIK A  
**Address:** 800 ALI BABA AVENUE  
**City-St-Zip:** OPA LOCKA, FL 33054**Title:** D ( ) Delete  
**Name:** SABIR, NASHID  
**Address:** 18350 NW 2ND AVENUE 5TH FLOOR  
**City-St-Zip:** MIAMI, FL 33169**Title:** D ( ) Delete  
**Name:** MONSOOR, AHMED Q  
**Address:** 711 NW 36TH AVENUE  
**City-St-Zip:** FORT LAUDERDALE, FL 33311**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:****Title:** VCHR (X) Change ( ) Addition  
**Name:** SABIR, NASHID  
**Address:** 18350 NW 2ND AVENUE 5TH FLOOR  
**City-St-Zip:** MIAMI, FL 33169**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RAYMOND RASHED

CHRD

02/09/2004

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

KAMAL RASHAD  
4281 HEATHER CIRCLE WEST  
PALM BEACH GARDEN, FL. 33410

HANAN K. ALI / TREASURE  
18522 N.W. 23 CT.  
MIAMI, FL. 33056

AMEENA ALI / SCRETRY  
5979 N.W. 151 STREET  
MIAMI LAKES, FL. 33016