

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007267

FILED
Jan 13, 2008
Secretary of State

Entity Name: KAYANI FAMILY FOUNDATION, INC.

Current Principal Place of Business:

7509 SR. 52
SUITE 110
BAYONET PT, FL 34667

New Principal Place of Business:

14440 BEAULY CR
HUDSON, FL 34667

Current Mailing Address:

P.O. BOX 339
PORT RICHEY, FL 34673 US

New Mailing Address:

FEI Number: 65-1053103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAYANI, MUHAMMAD B
14440 -BEAULEY CR
HUDSON, FL 34667 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: D () Delete
Name: BAKHTIAR KAYANI, MUHAMMAD
Address: P.O. BOX 339
City-St-Zip: PORT RICHEY, FL 34673

Title: D () Delete
Name: KAYANI, IMRAN
Address: P.O. BOX 339
City-St-Zip: PORT RICHEY, FL 34673

Title: D () Delete
Name: MOIN, NADIA K
Address: P.O. BOX 339
City-St-Zip: PORT RICHEY, FL 34673

Title: D () Delete
Name: KAYANI, AKHTAR
Address: P.O. BOX 339
City-St-Zip: PORT RICHEY, FL 34673

Title: D () Delete
Name: JAWAD, LUBNA
Address: P.O. BOX 339
City-St-Zip: PORT RICHEY, FL 34673

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: KAYANI, MUHAMMAD B
Address: P.O. BOX 339
City-St-Zip: PORT RICHEY, FL 34673

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

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Name:
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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: M B KAYANI

PRES

01/13/2008

Electronic Signature of Signing Officer or Director

Date