

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003118

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: INNER CITY GRASSROOTS CIVIC COALITION, INC.

**Current Principal Place of Business:**

1939 N.W. 81ST STREET  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

1939 N.W. 81ST STREET  
MIAMI, FL 33147

**New Mailing Address:**

FEI Number: 02-0625427

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAMIDULLAH, HANEEF  
1939 N.W. 81ST STREET  
MIAMI, FL 33147 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: HAMIDULLAH, HANEEF  
Address: 1939 NW 81 ST  
City-St-Zip: MIAMI, FL 33147

Title: D ( ) Delete  
Name: HAMIDULLAH, BARBARA  
Address: 1939 NW 81 ST  
City-St-Zip: MIAMI, FL 33147

Title: D ( ) Delete  
Name: PEARSON, COREY  
Address: 110 SE 4 AVE  
City-St-Zip: HALLANDALE, FL

Title: D ( ) Delete  
Name: STANLEY, EDWINA D  
Address: 3035 NW 82 STREET  
City-St-Zip: MIAMI, FL 33147

Title: D ( ) Delete  
Name: HOLTON, SHEILA  
Address: 2375 NW 181 TERRACE  
City-St-Zip: OPA LOCKA, FL 33056

**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: ( ) 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: HANEEF Q. HAMIDULLAH

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

DIR.

04/25/2008

\_\_\_\_\_  
Date