

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005815

FILED  
May 11, 2006  
Secretary of State

Entity Name: QASMI FOUNDATION, INC.

## Current Principal Place of Business:

4418 ST GEORGE CT  
KISSIMMEE, FL 34746

## New Principal Place of Business:

2613 MILTON AVE  
KISSIMMEE, FL 34741

## Current Mailing Address:

4418 ST GEORGE CT  
KISSIMMEE, FL 34746

## New Mailing Address:

2613 MILTON AVE  
KISSIMMEE, FL 34741

FEI Number: 59-3749842      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

MAJEED, ADBUL  
4418 ST GEORGE CT  
KISSIMMEE, FL 34746      US

## Name and Address of New Registered Agent:

MAJEED, ADBUL  
2613 MILTON AVE  
KISSIMMEE, FL 34741      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: \_\_\_\_\_

05/11/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD      ( ) Delete  
Name: MAJEED, ADBUL  
Address: 4418 ST. GEORGE CT  
City-St-Zip: KISSIMMEE, FL 34746

Title: VT      ( ) Delete  
Name: MAJEED, ZAMIRA  
Address: 4418 ST GEORGE CT  
City-St-Zip: KISSIMMEE, FL 34746

Title: ST      ( ) Delete  
Name: FAZEL, MAHOOD  
Address: 4418 ST GEORGE CT  
City-St-Zip: KISSIMMEE, FL 34746

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD      (X) Change ( ) Addition  
Name: MAJEED, ADBUL  
Address: 2613 MILTON AVE  
City-St-Zip: KISSIMMEE, FL 34741

Title: VT      (X) Change ( ) Addition  
Name: MAJEED, ZAMIRA  
Address: 2613 MILTON AVE  
City-St-Zip: KISSIMMEE, FL 34741

Title: ST      (X) Change ( ) Addition  
Name: FAZEL, MAHOOD  
Address: 2581 MONTEGO BAY BLVD  
City-St-Zip: KISSIMMEE, FL 34746

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.

SIGNATURE: ABDUL MAJEED

P

05/11/2006

Electronic Signature of Signing Officer or Director

Date