2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004133

FILED Apr 25, 2009 Secretary of State

Entity Nam	ne: SALIMA	TU BAH-BARRIE FOUNDATION	I, INC.	•	
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
341 NW CL PORT SAIN	JRRY ST IT LUCIE, FI	_ 34983			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
341 NW CL PORT SAIN	JRRY ST IT LUCIE, FI	_ 34983			
FEI Number:	11-3209880	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
341 NW CL	AMOND, MA JRRY ST IT LUCIE, FI				
The above in the State		submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	E:				
	Electro	onic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BARRIE-DIAN 341 NW CURI) Delete IOND, MARIAMA L RY ST LUCIE, FL 34983	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DIAMOND, ST 341 NW CURI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D (DIAMOND, LE 746 DUGWAY		Title: Name: Address:	() Change () Addition	

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: MARIAMA L. BARRIE-DIAMOND ED 04/25/2009