## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000005773

FILED Jan 12, 2004 Secretary of State

Entity Name: KIRAN HUSAIN IMMIGRATION ASSISTANCE FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 7000 WEST OAKLAND PARK BLVD #302 7000 WEST OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33313 FORT LAUDERDALE, FL 33313 **Current Mailing Address: New Mailing Address:** 7000 WEST OAKLAND PARK BLVD #302 7000 WEST OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33313 FORT LAUDERDALE, FL 33313 FEI Number: 55-0789679 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ASKARI, HINA 7000 WEST OAKLAND PARK BLVD # 302 FORT LAUDERDALE, FL 33313 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ASKARI, HINA Name: Name: Address: 10161 SW 55 LANE Address: City-St-Zip: COOPER CITY, FL 33328 City-St-Zip: Title: () Delete Title: () Change () Addition Name: DEPATHY, ROBERT Name: Address: 10161 SW 55 LANE Address: City-St-Zip: COOPER CITY, FL 33328 City-St-Zip: Title: () Delete Title: () Change () Addition HUSAIN, KIRAN Name: Name: 541 SW 42ND AVE # 223 Address: Address: City-St-Zip: MIAMI, FL 33134 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: MUSHTAQ, NAHEED Name: Address: 1272 NW 122 TERRACE Address: City-St-Zip: PEMBROKE PINES, FL 33026 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: HINA ASKARI D 01/12/2004