

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91205 045 ****61.25

DOCUMENT # N02000006673

1. Entity Name
**BANGLADESH CULTURAL ASSOCIATION OF
FLORIDA, INC**

Principal Place of Business
**1489 N MILITARY TR # 115 B
W PALM BEACH, FL 33409**

Mailing Address
**8253 WHITE ROCK CIR
BOYNTON, FL 33436**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

51-0424261

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**AHMED, IDRISH
8253 WHITE ROCK CIR
BOYNTON BEACH, FL 33436**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when reinstating)

DATE

FILE NOW FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **AHMED, IDRISH**
STREET ADDRESS **8253 WHITE ROCK CIR**
CITY-STATE-ZIP **LAKE WORTH, FL 33436**

TITLE ☐ Delete
NAME **AHMED, MAFIS**
STREET ADDRESS **6569 STONE HURTS AVE**
CITY-STATE-ZIP **LAKE WORTH, FL 33467**

TITLE ☐ Delete
NAME **KHUDA, QUDROT E**
STREET ADDRESS **228 SE 5 AVE**
CITY-STATE-ZIP **DEERFIELD BEACH, FL 33441**

TITLE ☐ Delete
NAME **ABDULFATTAH, SHEIK F**
STREET ADDRESS **8490 NW 44 ST**
CITY-STATE-ZIP **SUNRISE, FL 33351**

TITLE ☐ Delete
NAME **RAFIUDDIN, MOHAMMED**
STREET ADDRESS **4690 LONGKEY LN**
CITY-STATE-ZIP **COCONUT CREEK, FL 33073**

TITLE ☐ Delete
NAME **ALAM ASU, MOHAMMED**
STREET ADDRESS **721 NE 30 CT**
CITY-STATE-ZIP **POMPANO BEACH, FL 33064**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/17/03

CR2E037 (10/02)

11004806



☐ CHECK HERE IF MAKING CHANGES