

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000015

FILED
Mar 30, 2005
Secretary of State

Entity Name: MADINATUL ILM ISLAMIC CENTER INC.

Current Principal Place of Business:

7628 N 56TH ST., SUITE 5
TAMPA, FL 33617

New Principal Place of Business:

Current Mailing Address:

PO BOX 291878
TAMPA, FL 336871878

New Mailing Address:

FEI Number: 30-0136993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAIG, MIRZA M
30517 CLEARVIEW DR
ZEPHYRHILLS, FL 33544 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: VP () Delete
Name: SADIQUE, WAHEED
Address: 13419 THOMSAVILLE CIRCLE
City-St-Zip: TAMPA, FL 33617

Title: T () Delete
Name: MOMENI, SYRUS
Address: 10811 VENICE CIRCLE
City-St-Zip: TAMPA, FL 33635

Title: S (X) Delete
Name: RAZA, SYED
Address: 4112 MULLEN AVE
City-St-Zip: TAMPA, FL 33607

Title: P () Delete
Name: AMAR, NABILE
Address: 14401 HELLENIC DR #B8
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: SADIQUE, WAHEED
Address: 13419 THOMSAVILLE CIRCLE
City-St-Zip: TAMPA, FL 33617

Title: P (X) Change () Addition
Name: MOMENI, SYRUS
Address: 10811 VENICE CIRCLE
City-St-Zip: TAMPA, FL 33635

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: AMAR, NABILE
Address: 14401 HELLENIC DR #B8
City-St-Zip: TAMPA, FL 33613

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: WAHEED SADIQUE

S

03/30/2005

Electronic Signature of Signing Officer or Director

Date