2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003115

Entity Name: FRIEDA MADJID ZABULI FOUNDATION, INC.

FILED Jan 30, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5408 PALM WAY 5408 PALM WAY

LAKE WORTH, FL 33463 LAKE WORTH, FL 33463 US

Current Mailing Address: New Mailing Address:

5408 PALM WAY 5408 PALM WAY

LAKE WORTH, FL 33463 LAKE WORTH, FL 33463 US

FEI Number: 51-0484504 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:

MADJIO, FRIEDA M 5408 PALM WAY 5408 PALM WAY

LAKE WORTH, FL 33463 US LAKE WORTH, FL 33463 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: FRIEDA M MADJID 01/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: P D (X) Change () Addition Name: MADJID, FRIEDA M Name: MADJID, FRIEDA M

Address: 5408 PALM WAY Address: 5408 PALM WAY

City-St-Zip: LAKE WORTH, FL 334638025 City-St-Zip: LAKE WORTH, FL 33463 US

Title: () Delete Title: S D () Change (X) Addition

 Name:
 Name:
 TAHERI, ROBINA

 Address:
 Address:
 1577 FARMINGTON AVE

 City-St-Zip:
 City-St-Zip:
 WELLINGTON, FL 33414 US

Title: D () Change (X) Addition

 Name:
 Name:
 SARWARI, ZAHER

 Address:
 Address:
 5070 CANAL DRIVE

 City-St-Zip:
 City-St-Zip:
 LAKE WORTH, FL 33463 US

 Name:
 Name:
 AMIRI, RAZIA

 Address:
 37 PINE PLAIN RD

 City-St-Zip:
 City-St-Zip:
 BOXFORD, MA 01921 US

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: FRIEDA MADJID P 01/30/2009