2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N03000005176

Entity Name: BANGLADESH FOUNDATION OF FLORIDA, INC.

Current Principal Place of Business:

2761 NE 27 CIRCLE
PALM BEACH, FL 33431

New Principal Place of Business:

Current Mailing Address:

3961 FLORIDA AVE.
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 51-0472406 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAHMAN, ATIQUER
2761 NE 27 CIRCLE
BOCA RATON, FL 33431 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:	P	( ) Delete
Name:	RAHMAN, ATIQUER	
Address:	2761 NE 27 CIRCLE	
City-St-Zip:	BOCA RATON, FL 33431	
Title:	S	( ) Delete
Name:	UDDIN, MUZIB	
Address:	3961 FLORIDA AVE.	
City-St-Zip:	PALM BEACH GARDENS, FL 33410	
Title:	D	( ) Delete
Name:	KHAN, SHAHID	
Address:	3961 FLORIDA AVE	
City-St-Zip:	PALM BEACH GARDENS, FL 33410	
Title:	D	( ) Delete
Name:	CHOWDHURY, M. AMIR A	
Address:	3961 FLORIDA AVE.	
City-St-Zip:	PALM BEACH GARDENS, FL 33410	
Title:	D	( ) Delete
Name:	MANJU, ALI NOOR	
Address:	3961 FLORIDA AVE.	
City-St-Zip:	PALM BEACH GARDENS, FL 33410	
Title:	D	( ) Delete
Name:	KHAN, SHAMEEM G	
Address:	3961 FLORIDA AVE.	
City-St-Zip:	PALM BEACH GARDENS, FL 33410	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SHAMEEMKHAN D 04/30/2008

Electronic Signature of Signing Officer or Director — Date