2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2009
Secretary of State

DOCUMENT# N03000005358

Entity Name: IBN SEENA ACADEMY, INC.

Current Principal Place of Business:

8480 PALM PARKWAY
ORLANDO, FL 32836

New Principal Place of Business:

Current Mailing Address:

8480 PALM PARKWAY
ORLANDO, FL 32836

New Mailing Address:

FEI Number: 20-0043298 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HEMMALI, REHANNAH
8505 CEDAR COVE CT.
ORLANDO, FL 32819 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: D ( ) Delete
Name: HEMMALI, ABDOLHAMID
Address: 8505 CEDAR COVE CT.
City-St-Zip: ORLANDO, FL 32819

Title: D ( ) Delete
Name: CHOWDHURY, MUHAMMAD
Address: 1010 N. FORREST AVE.
City-St-Zip: KISSIMMEE, FL 34741

Title: D ( ) Delete
Name: HEMMALI, OMAR
Address: 8505 CEDAR COVE CT.
City-St-Zip: ORLANDO, FL 32819

Title: D ( ) Delete
Name: ALI, HAIDAR
Address: 9623 VIOLET DR.
City-St-Zip: ORLANDO, FL 32824

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: D ( ) Change (X) Addition
Name: BACCHUS, SARFRAZ
Address: 180 CHINQUAPIN WAY
City-St-Zip: ATHENS, GA 30605

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: ABDOLHAMID HEMMALI D 01/10/2009

Electronic Signature of Signing Officer or Director — Date