

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2004
Secretary of State**

DOCUMENT# N03000007819

Entity Name: UNIVERSAL HERITAGE FOUNDATION, INC.

Current Principal Place of Business:

233 ACADEMY DRIVE
KISSIMMEE, FL 34744 US

New Principal Place of Business:

Current Mailing Address:

233 ACADEMY DRIVE
KISSIMMEE, FL 34744 US

New Mailing Address:

FEI Number: 81-0632787 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAH, ZULFIQAR A
233 ACADEMY DRIVE
KISSIMMEE, FL 34744 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: TDCT () Delete
Name: SHAH, ZULFIQAR A
Address: 233 ACADEMY DRIVE
City-St-Zip: KISSIMMEE, FL 34744 US

Title: PSDT () Delete
Name: SHAIKH, M. ASHRAF
Address: 747 ARLINGTON ROAD
City-St-Zip: JACKSONVILLE, FL 32211

Title: TD () Delete
Name: UDDIN, TASNIM
Address: 8281 CORAL WAY
City-St-Zip: MIAMI, FL 33155

Title: T () Delete
Name: BADAWI, JAMAL
Address: ST.MARY'S UNIVERSITY, DEPT.OF MANAGEMENT
City-St-Zip: HALIFAX,NOVA SCOTIA, B3M2P6 OC

Title: T () Delete
Name: SIDDIQI, MUZAMMIL H
Address: ONE AL-RAHMAN PLAZA
City-St-Zip: GARDEN GROVE, CA 92844

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

Title: T () Change (X) Addition
Name: NYANG, SULAYMAN
Address: 233 ACADEMY DRIVE
City-St-Zip: KISSIMMEE, FL 34744

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: M. ASHRAF SHAIKH

Electronic Signature of Signing Officer or Director

PSDT

04/30/2004

Date