

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009995

FILED
May 03, 2010
Secretary of State

Entity Name: FOUNDATION OF LIGHTS, INC.

Current Principal Place of Business:

120 FLORAL ST
OCOE, FL 34761

New Principal Place of Business:

Current Mailing Address:

9320 LAKE FISCHER BLVD
GOTHA, FL 34734

New Mailing Address:

FEI Number: 20-0399279 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

NASIR, NAEEM
9320 LAKE FISCHER BLVD
GOTHA, FL 34734 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: HABACH, IBRAHIM
Address: 9320 LAKE FISCHER BLVD
City-St-Zip: GOTHA, FL 34734

Title: D
Name: SIDDIQUI, MUSARRAT
Address: 9320 LAKE FISCHER BLVD
City-St-Zip: GOTHA, FL 34734

Title: D
Name: QURESHI, MOHAMMAD
Address: 9320 LAKE FISCHER BLVD
City-St-Zip: GOTHA, FL 34734

Title: D
Name: NASIR, NAEEM D
Address: 9320 LAKE FISCHER BLVD
City-St-Zip: GOTHA, FL 34734

Title: D
Name: BACCHUS, ABDOOL
Address: 9320 LAKE FISCHER BLVD
City-St-Zip: GOTHA, FL 34734

Title: D
Name: ALI, SHAMEEM
Address: 9320 LAKE FISCHER BLVD
City-St-Zip: GOTHA, FL 34734

I hereby 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 all other like empowered.

SIGNATURE: NAEEM NASIR

D

05/03/2010

Electronic Signature of Signing Officer or Director

Date