2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2008
Secretary of State

DOCUMENT# N05000012124

Entity Name: AL SEERAH SOCIETY OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

12922 S.W. 132 CT
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

16236 S.W. 26TH ST
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 20-3892718 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GILL, ABDUL M
16236 S.W. 26TH ST
MIRAMAR, FL 33027 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: VP ( ) Delete
Name: QUADRI, SYED K
Address: 7946 HIGHSMITH CT
City-St-Zip: LAKE WORTH, FL 33467

Title: P ( ) Delete
Name: QUADRI, SYED J
Address: 7946 HIGHSMITH CT
City-St-Zip: LAKE WORTH, FL 33467

Title: S ( ) Delete
Name: GILL, ABDUL M
Address: 16236 S.W. 26TH ST
City-St-Zip: MIRAMAR, FL 33027

Title: D ( ) Delete
Name: HASHMI, SYED M
Address: 1235 SPRINGHILL DR
City-St-Zip: ALGONQUIN, IL 60102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: QUADRI, SYED J
Address: 7946 HIGHSMITH CT
City-St-Zip: LAKE WORTH, FL 33467

Title: VP (X) Change ( ) Addition
Name: QUADRI, SYED K
Address: 7946 HIGHSMITH CT
City-St-Zip: LAKE WORTH, FL 33467

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: ABDUL M. GILL S 01/13/2008

Electronic Signature of Signing Officer or Director — Date