## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000001054

FILED Jaņ 26, 2<u>00</u>9 Secretary of State

Entity Name: SHARIA ACADEMY OF AMERICA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1000 118TH AVENUE N 6899 NICOLE LN. **SUITE 1002** LARGO, FL 33771 US ST. PETERSBURG, FL 33716 US **New Mailing Address: Current Mailing Address:** P.O. BOX 98 PO BOX 94 PINELLAS PARK, FL 33782 PINELLAS PARK, FL 33780 US US FEI Number: 14-1948738 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BATRAWY, AHMAD A 1132 DARLÍNGTON OAK CT NE ST. PETERSBURG, FL 33703 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete () Change () Addition ABDELRAHIM, MOHAMED S Name: Name: 8212 TOWNSEND STREET Address: Address: City-St-Zip: FAIRFAX, VA 22031 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: BATRAWY, AHMED A Name: Address: 1132 DARLINGTON OAK CT NE Address: City-St-Zip: ST. PETERSBURG,, FL 33703 City-St-Zip: Title: SEC () Delete Title: () Change () Addition ELHAGALY, HATEM Name: Name: 2534 CENTRAL AVENUE NE Address: Address: City-St-Zip: MINNEAPOLIS, MN 55418 US City-St-Zip: Title: TREA ( ) Delete Title: () Change () Addition BARAZANJI, HAITHAM G Name: Name: Address: P.O. BOX 94 Address: City-St-Zip: PINELLAS PARK, FL 33780 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: AHMAD BATRAWY **VP** 01/26/2009