

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001720

FILED
Apr 30, 2009
Secretary of State

Entity Name: ERSHAD CENTER INC.

Current Principal Place of Business:

6669 SW 59 PLACE
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

6669 SW 59 PLACE
MIAMI, FL 33143

New Mailing Address:

FEI Number: 20-4276660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EBRAHIMI, MASOUD
6669 SW 59 PLACE
MIAMI, FL 33143 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: PD () Delete
Name: EBRAHIMI, MASOUD
Address: 6669 SW 59 PLACE
City-St-Zip: MIAMI, FL 33143

Title: VP () Delete
Name: SARAB, YAZDAN
Address: 6669 SW 59 PLACE
City-St-Zip: MIAMI, FL 33143

Title: S () Delete
Name: SARAB, YAZDAN
Address: 6669 SW 59 PLACE
City-St-Zip: MIAMI, FL 33143

Title: T () Delete
Name: AMINOLROAYA-YAMINI, MOJTABA
Address: 6669 SW 59 PLACE
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TALEBPOOR, MEHDI
Address: 6669 SW 59 PLACE
City-St-Zip: MIAMI, FL 33143

Title: VP (X) Change () Addition
Name: GHORBANI, RASOUL
Address: 6669 SW 59 PLACE
City-St-Zip: MIAMI, FL 33143

Title: S (X) Change () Addition
Name: ROSTAMI, MOHSEN
Address: 6669 SW 59 PLACE
City-St-Zip: MIAMI, FL 33143

Title: T (X) Change () Addition
Name: MAHTABFAR, ARDESHIR
Address: 6669 SW 59 PLACE
City-St-Zip: MIAMI, FL 33143

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: M A YAMINI

T

04/30/2009

Electronic Signature of Signing Officer or Director

Date