

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003270

FILED
Apr 23, 2011
Secretary of State

Entity Name: US-ALGERIAN ASSOCIATION OF PROFESSIONALS AND SCIENTISTS, INC

Current Principal Place of Business:

2509 SW ABNEY STREET
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

2509 SW ABNEY STREET
PORT ST. LUCIE, FL 34953

New Mailing Address:

FEI Number: 26-2653600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOUKERROU, LAKHDAR
2509 SW ABNEY STREET
PORT ST. LUCIE, FL 34953 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: P D
Name: BOUKERROU, LAKHDAR
Address: 2509 SW ABNEY STREET
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VP D
Name: BEDROUNI, MOHAMED
Address: 4518 SEMINOLE DRIVE
City-St-Zip: SAN DIEGO, CA 92115

Title: T D
Name: GHENAI, CHAOUKI
Address: 15425 SW 35TH TERRACE
City-St-Zip: MIAMI, FL 33185

Title: S D
Name: VERIN, DEAN
Address: 219 JEFFERSON AVE
City-St-Zip: CLEARWATER, FL 33755

Title: G D
Name: BELGUEDJ, MOURAD
Address: 5400 LINDEN COURT
City-St-Zip: BETHESDA, MD 20814

Title: G D
Name: MOUSSAOUI, MOKHTAR
Address: 1301 CONEJO WAY
City-St-Zip: SUNNYVALE, CA 94596

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: CHAOUKI GHENAI

TD

04/23/2011

Electronic Signature of Signing Officer or Director

Date