

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003665

FILED  
Apr 26, 2009  
Secretary of State

Entity Name: QALAM AR-RAHMAH, INC.

## Current Principal Place of Business:

2508 SW 35TH PL, UNIT S-113  
GAINESVILLE, FL 32608

## New Principal Place of Business:

## Current Mailing Address:

2508 SW 35TH PL, UNIT S-113  
GAINESVILLE, FL 32608

## New Mailing Address:

FEI Number: 33-1209424

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAHMAN, SHIREEN S  
2508 SW 35TH PL, UNIT S-113  
GAINESVILLE, FL 32608 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: D ( ) Delete  
Name: RAHMAN, SHIREEN S  
Address: 2508 SW 35TH PL, UNIT S-113  
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete  
Name: RAHMAN, MARYAM  
Address: 2508 SW 35TH PL, UNIT S-113  
City-St-Zip: GAINESVILLE, FL 32608

Title: T ( ) Delete  
Name: RAHMAN, HASEEB A  
Address: 2508 SW 35TH PL, UNIT S-113  
City-St-Zip: GAINESVILLE, FL 32608

Title: D (X) Delete  
Name: AHMAD, MUSTAFA  
Address: 2508 SW 35TH PL, UNIT S-113  
City-St-Zip: GAINESVILLE, FL 32608

Title: D (X) Delete  
Name: AHMAD, HAKEM S  
Address: 2508 SW 35TH PL, UNIT S-113  
City-St-Zip: GAINESVILLE, FL 32608

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: RAHMAN, MARYAM  
Address: 2508 SW 35TH PL, UNIT R-107  
City-St-Zip: GAINESVILLE, FL 32608

Title: D (X) Change ( ) Addition  
Name: TABBAA, AMAL S  
Address: 467 SUDDUTH AVE  
City-St-Zip: PANAMA CITY, FL 32401

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: SHIREEN S. RAHMAN

D

04/26/2009

Electronic Signature of Signing Officer or Director

Date