2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009005

FILED Mar 10, 2009 Secretary of State

Entity Name: MUSLIM ALLIANCE FOR THE PROMOTION OF ENTREPRENEURSHIP, INC.

Current Principal Place of Business: New Principal Place of Business: 10006 KINGSHYRE WAY TAMPA, FL 33647 **Current Mailing Address: New Mailing Address:** 10006 KINGSHYRE WAY TAMPA, FL 33647 FEI Number: 26-3455210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: WALKER, GARY UDDIN, SHAHEEN 202 S. ROME AVENUE 10006- KINGSHYRE WAY SUITE 100 TAMPA, FL 33647 TAMPA, FL 33606 US 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: SHAHEEN UDDIN 03/10/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete () Change () Addition UDDIN, FIROZ Name: Name: 10006 KINGSHYRE WAY Address: Address: City-St-Zip: TAMPA, FL 33647 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: NARI, JUNAID Name: Address: 20119 STILL WIND DRIVE Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: Title: SEC () Delete Title: SEC (X) Change () Addition BONDOGJI, MAZEN Name: KAMAL, SYED T Name: 18128 PALM BEACH DRIVE 17925 - CACHET ISLE DRIVE Address: Address: City-St-Zip: TAMPA, FL 33647 US City-St-Zip: TAMPA, FL 33647 US () Delete Title: TREA Title: () Change () Addition UDDIN, FIROZ Name: Name: 10006 KINGSHYRE WAY Address: Address: City-St-Zip: TAMPA, FL 33647 US 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: FIROZ UDDIN **PRES** 03/10/2009