

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010183

FILED  
Apr 27, 2010  
Secretary of State

**Entity Name:** ISLAMIC CENTER OF BROWARD, INC.

**Current Principal Place of Business:**

8658 NW 44TH STREET  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

8658 NW 44TH STREET  
SUNRISE, FL 33351

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SOFTBOOKS, INC.  
5373 N. NOB HILL ROAD  
SUNRISE, FL 33351 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: VP  
Name: CHAUDRY, ASGHAR A  
Address: 11711 NW 26 COURT  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: AS  
Name: KHAN, SAJID A  
Address: 4242 NW 99TH TERRACE  
City-St-Zip: SUNRISE, FL 33351

Title: T  
Name: SATTAR, ALTAF  
Address: 812 SW 191 LANE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: AT  
Name: MAHENTI, ABDUL B  
Address: 400 NW 87TH LANE, # 104  
City-St-Zip: PLANTATION, FL 33324

Title: P  
Name: AHMED, RASHID  
Address: 12159 NW 35TH STREET  
City-St-Zip: SUNRISE, FL 33323

Title: S  
Name: AHMED, RIZWAN  
Address: 7647 NW 127TH MANOR  
City-St-Zip: PARKLAND, FL 33076

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: ALTAF SATTAR

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04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date