

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08491

FILED  
Feb 02, 2009  
Secretary of State

**Entity Name:** MUSLIM COMMUNITY OF PALM BEACH COUNTY, INCORPORATED

**Current Principal Place of Business:**

4893 PURDY LANE  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 18946  
WEST PALM BEACH, FL 33416

**New Mailing Address:**

**FEI Number:** 59-2606276

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SULAIMAN, HAROON  
430 SOUTH DIXIE HIGHWAY  
LAKE WORTH, FL 33460 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 ( ) Delete  
Name: SULAIMAN, HAROON  
Address: 430 S. DIXIE HWY  
City-St-Zip: LAKE WORTH, FL 33460 US

Title: T ( ) Delete  
Name: AHMED, KAZI  
Address: 430 S. DIXIE HWY  
City-St-Zip: LAKE WORTH, FL 33460 US

Title: VP ( ) Delete  
Name: CHOWDHURY, KABIR  
Address: 6179 SEVEN SPRINGS BLVD  
City-St-Zip: GREEN ACRES, FL 33463 US

Title: AGS ( ) Delete  
Name: MOHAMMAD, ALI  
Address: 5150 WILLOW POND PLACE WEST  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: GS ( ) Delete  
Name: MUZAMMIL, PATEL  
Address: 13860-40 WELLINGTON TRACE  
City-St-Zip: WELLINGTON, FL 33414 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: GS (X) Change ( ) Addition  
Name: PATEL, M  
Address: PO BOX 211358  
City-St-Zip: WEST PALM BEACH, FL 33421 US

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: MUZAMMIL PATEL

GS

02/02/2009

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

\_\_\_\_\_  
Date