

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000006209

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Entity Name:** AFGHAN RELIEF ORGANIZATION, U.S. INC.

**Current Principal Place of Business:**

1140 LOYOLA COURT  
SANFORD, FL 32771

**New Principal Place of Business:**

**Current Mailing Address:**

1140 LOYOLA COURT  
SANFORD, FL 32771

**New Mailing Address:**

**FEI Number:** 27-2877130

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAFFER, HASNAIN M  
1140 LOYOLA COURT  
SANFORD, FL 32771 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  
**Name:** JAFFER, HASNAIN M  
**Address:** 1140 LOYOLA COURT  
**City-St-Zip:** SANFORD, FL 32771

**Title:** VP  
**Name:** JAFFER, HUSAIN H  
**Address:** 7025 CR 46 A, SUITE 1071, BOX 227  
**City-St-Zip:** LAKE MARY,, FL 32746

**Title:** T  
**Name:** KASSAM, AKILA  
**Address:** 7025 CR 46 A, SUITE 1071, BOX 227  
**City-St-Zip:** LAKE MARY, FL 32746

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:** HASNAIN M JAFFER

PRES

01/18/2012

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

\_\_\_\_\_  
Date