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Jan 17 1997 8:00am  
Secretary of State



NONPROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N50370 (8)

1. Corporation Name

ISLAMIC MOVEMENT OF FLORIDA, INC.



Principal Place of Business

8110 PASADENA BLVD  
PEMBROKE PINES FL 33024  
US

Mailing Address

6861 W EDGEWOOD AVE  
DAVIE FL 33331  
US

3. Date Incorporated or Qualified

06/10/1992

3a. Date of Last Report

02/27/1996

2. Principal Place of Business

21 8110 PASADENA BLVD.

2a. Mailing Address

26 6861 W. WEDGEWOOD AVE

4. FEI Number

65-0362777

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

23 PEMBROKE PINES, FLORIDA

City & State

28 DAVIE, FLORIDA

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

24 33024

Country

25 U.S.A.

Zip

29 33331

Country

30 U.S.A.

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes  No

9. Name and Address of Current Registered Agent

ALI, NUR  
6861 W EDGEWOOD AVE  
DAVIE FL 33331

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P/D  DELETE  
NAME ROOKNUDEEN, GHANY  
STREET ADDRESS 730 NORTH 65TH AVENUE  
CITY-ST-ZIP HOLLYWOOD FL

TITLE D  DELETE  
NAME KHAN, MONEER  
STREET ADDRESS 20214 NW 22 CT  
CITY-ST-ZIP MIAMI FL

TITLE D  DELETE  
NAME ALI, NUR  
STREET ADDRESS 6861 W. EDGEWOOD AVE  
CITY-ST-ZIP DAVIE FL

TITLE D  DELETE  
NAME HASSAN, NAZEER  
STREET ADDRESS 5241 WEST SAXON CIR  
CITY-ST-ZIP FT LAUDERDALE FL

TITLE D  DELETE  
NAME MOHAMED, MOIEN  
STREET ADDRESS 8321 SW 20TH STREET  
CITY-ST-ZIP MIRAMAR FL

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D  Change  Addition  
1.2 NAME ROOKNUDEEN GHANY  
1.3 STREET ADDRESS 730 NORTH 65th AVENUE  
1.4 CITY-ST-ZIP HOLLYWOOD, FL33024

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE P/D  Change  Addition  
6.2 NAME NASEEB KHAN  
6.3 STREET ADDRESS 2241 S. SHERMAN CIRCLE, 101C  
6.4 CITY-ST-ZIP MIRAMAR, FL, 33025

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: *Ali Nur* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-97 (954)680-9581 Date Daytime Phone # 0078583

CR2E037 (9/96)