

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State

02-28-2002 90016 025 ****61.25

DOCUMENT # N94000000600

1. Entity Name

THE ISLAMIC SOCIETY OF SARASOTA AND BRADENTON, I NC.

Principal Place of Business

Mailing Address

**4350 N. LOCKWOOD RIDGE RD.
 SARASOTA FL 34234**

**P.O. BOX 17954
 SARASOTA FL 34276**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0469038

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JABER, HASSAN
 1568 LANDING TERRACE
 SARASOTA FL 34231**

Name

KHAN, ADRIS H.

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

4350 N. LOCKWOOD RIDGE ROAD

City

SARASOTA

FL

Zip Code

34234

8. 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

Adris H Khan

2/5/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD JABER, HASSAN 1568 LANDING TERRACE SARASOTA FL 34231	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD HASSAN, MOHAMED SHIRAZ 6224 45TH AVENUE DR. EAST BRADENTON FL 34203	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD HAFAZ, MUNIR 8234 60TH STREET CRL EAST # 906 SARASOTA FL 34243	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KHATIB, SAMIR YOUNES 432 BAYSHORE DR VENICE FL 34285	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MOUSSA, SOLIMAN H 4701 LONGLAKE DR SARASOTA FL 34233	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT KHAN, ADRIS H 4350 N. LOCKWOOD RIDGE RD SARASOTA, FL 34234	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR SWAITY, HAIEL 4350 N. LOCKWOOD RIDGE ROAD SARASOTA, FL 34234	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR HANAFI AYAD, HEMMALI G. 4350 N. LOCKWOOD RIDGE ROAD SARASOTA, FL 34234	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR KHATIB, SAMIR Y 4350 N. LOCKWOOD RIDGE ROAD SARASOTA, FL 34234	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MOUSSA, SOLIMAN H 4350 N. LOCKWOOD RIDGE ROAD SARASOTA, FL 34234	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment, with an address, with all other like empowered.

SIGNATURE:

Soliman H. Moussa

Soliman H. Moussa 2/5/02 (41)351-3393

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)