

FILED
Feb 20, 1999 8:00 am
Secretary of State

02-20-1999 90160 029 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N95000001175

1. Corporation Name
ISLAMIC SCHOOL OF MIAMI, INC.

87721 - 90160 - 29



Principal Place of Business 8281 CORAL WAY MIAMI FL 33155	Mailing Address 8281 CORAL WAY MIAMI FL 33155
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21. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 03/09/1995
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	4. FEI Number 65-0565951
23. City & State	28. City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24. Zip	29. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
25. Country	30. Country	

9. Name and Address of Current Registered Agent UDDIN, TASNIM 7630 SW 73RD PLACE MIAMI FL 33143	10. Name and Address of New Registered Agent
	81. Name
	82. Street Address (P.O. Box Number is Not Acceptable)
	83.
	84. City
	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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AL-SAHILL, KHALED	1.2 NAME	
STREET ADDRESS	11199 NORTH KENDALL DR, APT J-201	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33176	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHEBBI, TAREK	2.2 NAME	
STREET ADDRESS	7601 SW 59TH CT	2.3 STREET ADDRESS	
CITY-ST-ZIP	S MIAMI FL 33143	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FAROUK, MOHAMMED	3.2 NAME	
STREET ADDRESS	8223C SW 107TH AVENUE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33173	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	IBRAHIMUDDIN, MOHAMMAD	4.2 NAME	
STREET ADDRESS	12841 SW 187TH TERRACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KARAKIRA, BILAL	5.2 NAME	
STREET ADDRESS	9820 W. CALUSA CLUB DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAHEEM, LYNDIA	6.2 NAME	
STREET ADDRESS	12013 SW 110TH STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186	6.4 CITY-ST-ZIP	

14. 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 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 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: SIGNATURE REQUIRED UDDIN 1-25-99 205-264-089
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



In the name of Allah, Most Gracious, Most Merciful

THE ISLAMIC SCHOOL OF MIAMI, INC.

580113-90011-14
N95000001175

BOARD MEMBERS

Tasnim Uddin, P.E.
Chairperson
Abdul Hamid Samra, Ph.D.
Vice Chairperson
Mohammed Farouk, Ed.D.
Secretary
Lynda Raheem,
Treasurer
Khaled Al-Sahili, Ph.D., P.E.
Tarek Chebbi
Mohammad Ibrahimuddin
Bilal Karakira
Syed Rashid Noor

June 21, 1999

FLORIDA DEPARTMENT OF STATE
Ms. Katherine Harris
Secretary of State
Division of Corporations
P.O. BOX 6327
Tallahassee, Florida 32314

Mohammad II
Principal
Mohammed F.
Vice Principal
Syed Rashid A.
Registrar

SUBJECT: ISLAMIC SCHOOL OF MIAMI, INC.
Ref. Number: N95000001175

Gentlemen:

Please be advised that Islamic School of Miami has nine (9) directors and only six (6) are listed on the Annual report. The names and addresses of other three (3) directors not listed, are as follows:

Tasnim Uddin, Chairman
7630 S.W. 73 Place
Miami, Florida 33143

Syed Rashid Noor
8821 S.W. 142 Ave # 1821
Miami, Florida 33186

Abdul Hamid Samra, Vice Chairman
5030 S.W. 149 Place
Miami, Florida 33185

We request that you please include these names and make appropriate corrections in your record.

We thank you

Sincerely,

Tasnim Uddin
Director and Chairman of Board

ISOM