

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000004431

1. Corporation Name

FEDERATION OF THE BANGLADESHI ASSOCIATIONS OF NORTH
AMERICA, (FOBANA), INC.

Principal Place of Business

Mailing Address

6425D Redpine Lane
West Palm Beach, Florida 33415

3. Date Incorporated or Qualified

3a. Date of Last Report

September 14, 1995

None

4. FEI Number

59-335-9113

Applied For

Not Applicable

5. Certificate of Status Desired

X

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

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

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 8025 Manvel Drive

26 8025 Manvel Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Port Richey, Florida

28 Port Richey, Florida

Zip

Country

Zip

Country

24 34668

25 Pasco

29 34668

30 Pasco

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Dr. Zoghlul Kabir
8025 Manvel Drive
Port Richey, Florida 34668

81 Name Dr. Zoghlul Kabir

82 Street Address (P.O. Box Number is Not Acceptable)
8025 Manvel Drive

83

84 City Port Richey

FL

85 Zip Code
34668

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 Zoghlul Kabir (Dr. Zoghlul Kabir) 02/12/1996

Signature typed or printed name of registered agent and true, applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME D
STREET ADDRESS Dr. Mohammad Anwar Meah
CITY-ST-ZIP 626 Farmdale Road, Franklin Lake, N.J. 07417

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME T
STREET ADDRESS Dr. Mohammad I. Khan
CITY-ST-ZIP 140 Minnisink Road, Totowa, N.J. 07512

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

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME Tapas Biswas
STREET ADDRESS 8025 Manvel Drive
CITY-ST-ZIP Port Richey, Florida 34668

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

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Mohammad Anwar Meah

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 14, 1996

Date

Daytime Phone #

CR2E037 (12/95)