

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000005242

FILED
Jul 29, 2005
Secretary of State

Entity Name: JAMAT AL-MUM'MINEEN, INC.

Current Principal Place of Business:

7942 W. SAMPLE RD
MARGATE, FL 33065

New Principal Place of Business:

3222 HOLIDAY SPRINGS BLVD.
MARGATE, FL 33063

Current Mailing Address:

3283 W BUENA VISTA DR
MARGATE, FL 33063

New Mailing Address:

FEI Number: 65-0632483 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALI, YAZID
3283 N. BUENA VISTA
MARGATE, FL 33063 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: YAZID ALI

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALI, YAZID
Address: 3283 W. BUENA VISTA
City-St-Zip: MARGATE, FL 33063

Title: V () Delete
Name: REYAS, SHAZIM
Address: 7942 W SAMPLE RD
City-St-Zip: MARGATE, FL 33063

Title: T () Delete
Name: KHAN, ZAHID
Address: 11118 NW 34 CT
City-St-Zip: CORAL SPRINGS, FL 33065

Title: S () Delete
Name: ARIF, AHMED
Address: 225 NW 78TH AVE
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: ARIF, AHMED
Address: 3231 HOLIDAY SPRINGS BLVD. UNIT 101
City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: YAZID ALI

P

07/29/2005

Electronic Signature of Signing Officer or Director

Date