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May 30 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 # N96000000037 (9)

1. Corporation Name

THE ORLANDO ISLAMIC EDUCATIONAL & CULTURAL CENTE  
R, INC.

Principal Place of Business

Mailing Address

P.O. BOX 5681  
WINTER PARK FL 32783

P.O. BOX 5681  
WINTER PARK FL 32783-5681



3. Date Incorporated or Qualified 01/01/1996  
3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Same

26 Same

4. FEI Number

59-3358728

Applied For

Not Applicable

22 Suite, Apt. #, etc.

Suite, Apt. #, etc.

23 City & State

City & State

24 Zip

Country

Zip

Country

5. Certificate of Status Desired

\$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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KOUATLI, RADWAN  
110 SCOTTSDALE SQUARE  
WINTER PARK FL 32792

81 Name

Mahmoud A. ElSabagh

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

1465 Mona Drive

83

84 City

Kissimmee

FL

85 Zip Code

34744

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

M. ElSabagh

Mahmoud A. ElSabagh

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President (P) ☐ DELETE  
NAME Radwan Kouatli  
STREET ADDRESS 110 Scottsdale Square  
CITY-ST-ZIP Winter Park, FL 32792

1.1 TITLE T ☐ Change ☒ Addition  
1.2 NAME Nabil A Kileh  
1.3 STREET ADDRESS 7 Sheepy Hollow Cove Road  
1.4 CITY-ST-ZIP Longwood, FL 32750

TITLE VP ☐ DELETE  
NAME Mohamed Saad Hennawy  
STREET ADDRESS 5500-D Cinderlane Parkway  
CITY-ST-ZIP Orlando, FL 32808

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

TITLE T ☐ DELETE  
NAME Maunad Belkhat  
STREET ADDRESS 11850 Reedy Creek Drive, Apt 308  
CITY-ST-ZIP Orlando, FL 32836

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

TITLE S ☐ DELETE  
NAME Mahmoud A. ElSabagh  
STREET ADDRESS 1465 Mona Drive  
CITY-ST-ZIP Kissimmee, FL 34744

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

TITLE T ☐ DELETE  
NAME Ashraf Riad  
STREET ADDRESS 12958 Forestedge Circle  
CITY-ST-ZIP Orlando, FL 32828

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

TITLE T ☐ DELETE  
NAME Jamal Khamlich  
STREET ADDRESS 11850 Reedy Creek Drive, Apt 308  
CITY-ST-ZIP Orlando, FL 32836

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

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 if changed, or on an attachment with an address.

SIGNATURE:

M. ElSabagh

Mahmoud A. ElSabagh

5/20/97

(407) 828-2250

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0018548

CR2E037 (9/96)