

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 11, 2003 8:00 am
Secretary of State

08-11-2003 90307 023 ****70.00

DOCUMENT # N96000000169

1. Entity Name
ASSALAM CENTER, INC.



Principal Place of Business
**21218 ST. ANDREWS BLVD. UNIT #147
BOCA RATON FL 33433**

Mailing Address
**21218 ST. ANDREWS BLVD. UNIT #147
BOCA RATON FL 33433**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0638062**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒

\$8:75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ELHASSAN, SAIFELDEAN
1545 SW 14TH STREET
BOCA RATON FL 33486**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MAHGOUB, IMAD
STREET ADDRESS 5901 TOWN BAY DRIVE #8-12
CITY-ST-ZIP BOCA RATON FL 33486 ☐ Delete

TITLE PD
NAME MAHGOUB, IMAD
STREET ADDRESS 2663 NW 40th St.
CITY-ST-ZIP BOCA RATON, FL 33434 ☒ Change ☐ Addition

TITLE D
NAME COLUCCI, RAY
STREET ADDRESS 21042 VIA EDEN
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME IBRAHIM, NAZH
STREET ADDRESS 10963 BAL HARBOR DRIVE
CITY-ST-ZIP BOCA RATON FL 33498 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME ELHASSAN, SAIFELDEAN
STREET ADDRESS 1545 SW 14TH ST
CITY-ST-ZIP BOCA RATON FL 33486 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME MAZOUZ, ABDELKADER
STREET ADDRESS 11190 HARBOUR SPRINGS CIRCLE
CITY-ST-ZIP BOCA RATON FL 33428 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DT
NAME HAMADE, WISSAM
STREET ADDRESS 9173 TIVOLI PLACE
CITY-ST-ZIP BOCA RATON FL 33434 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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: **IMAD MAHGOUB 8/6/03(56)297-3458**

CR2E037 (10/02)

pls- see attached paper

TITLE

D

Attachment#

NAME

REDA A. ABDEL - FATTAH

10111023

#N960000000169

STREET ADDRESS 1899 SW 17TH STREET

CITY- ST- ZIP BOCA RATON, FL 33486

TITLE

D

NAME

EMAD DARWICHE

STREET ADDRESS 20495 VIA MARISA

CITY- ST- ZIP BOCA RATON, FL 33498