

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2000 8:00 am
Secretary of State

05-02-2000 90027 014 ****70.00
05-31-2000 90071 043 ****61.25

00057558

DO NOT WRITE IN THIS SPACE

DOCUMENT # N97000001150

1. Entity Name

ALAZHAR SCHOOL, INC.

Principal Place of Business
4505 NW 103RD AVE.
SUNRISE, FL 33351-7935

Mailing Address
817 S. UNIVERSITY DR.
PLANTATION FL 33324

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
65-0751725

Applied For
☐ Not Applicable

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

BEHAIRY, MOHAMED S
512 JACARANDA WAY
PLANTATION, FL 33324

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.

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P/D ☐ Delete
NAME BEHAIRY, MOHAMED S
STREET ADDRESS 817 S UNIVERSITY DR #104
CITY-ST-ZIP PLANTATION, FL 33324

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

TITLE VPD ☐ Delete
NAME SALEH, MUSTAFA
STREET ADDRESS 11372 WEST STATE RD 84
CITY-ST-ZIP FT. LAUDERDALE, FL 33325

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

TITLE SD ☐ Delete
NAME HALWAGY, ALAA
STREET ADDRESS 164 NW 45TH AVE
CITY-ST-ZIP DEERFIELD BEACH, FL 33442

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

TITLE T ☐ Delete
NAME ELHALWAGY, ADEL
STREET ADDRESS 4324 NW 9TH AVE BUILDING 5
CITY-ST-ZIP POMPAÑO BEACH, FL 33064

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 10401 W. Broward Blvd. Apt 208
CITY-ST-ZIP Planatation, FL 33324

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR:EO37 (9/99)