

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001150

Entity Name: ALAZHAR SCHOOL, INC.

FILED
Mar 11, 2009
Secretary of State

Current Principal Place of Business:

7201 WEST MCNAB ROAD
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

7201 WEST MCNAB ROAD
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 65-0751725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEHAIRY, MOHAMED S
8175 UNIVERSITY DRIVE
SUITE 104
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BEHAIRY, MOHAMED S
Address: 8175 UNIVERSITY DRIVE SUITE 104
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: KOLALLI, KAMELIA
Address: 13469 NW 5TH COURT
City-St-Zip: PLANTATION, FL 33325

Title: PD () Delete
Name: HALWAGY, ALAA E
Address: 10020 NW 58TH COURT
City-St-Zip: PARKLAND, FL 33076

Title: BC () Delete
Name: MOHAMMED, MOUBAYED
Address: 7201 W. MCNAB RD
City-St-Zip: TAMARAC, FL 33321

Title: D () Delete
Name: HOWEEDY, ALY
Address: 739 LAKE BLVD
City-St-Zip: WESTON, FL 33326

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: B (X) Change () Addition
Name: BEHAIRY, MOTAZ
Address: 7201 WEST MCNAB ROAD
City-St-Zip: TAMARAC, FL 33321

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: D () Change (X) Addition
Name: AWAD, MEDHAT
Address: 7201 WEST MCNAB ROAD
City-St-Zip: TAMARAC, FL 33321

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MOHAMED BEHAIRY

D

03/11/2009

Electronic Signature of Signing Officer or Director

Date