

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006021

FILED  
Mar 30, 2008  
Secretary of State

Entity Name: ISLAMIC CENTER OF BOCA RATON, INC.

**Current Principal Place of Business:**

3100 NW 5TH AVE  
BOCA RATON, FL 33431 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 273364  
BOCA RATON, FL 33427 US

**New Mailing Address:**

FEI Number: 65-0870204      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SANHAJI, MOHAMMED  
3100 NW 5TH AVE  
BOCA RATON, FL 33431 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: PRES ( ) Delete  
Name: KHAN, JALAL U  
Address: 3100 NW 5TH AVE  
City-St-Zip: BOCA RATON, FL 33431 US

Title: EXED ( ) Delete  
Name: SANHAJI, MOHAMMED  
Address: 3100 NW 5TH AVE  
City-St-Zip: BOCA RATON, FL 33431 US

Title: D ( ) Delete  
Name: ALHALABI, BASSEM  
Address: 3100 NW 5TH AVE  
City-St-Zip: BOCA RATON, FL 33431 US

Title: D ( ) Delete  
Name: QURESHI, KHALID  
Address: 3100 NW 5TH AVE  
City-St-Zip: BOCA RATON, FL 33431 US

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

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: MOHAMMED SANHAJI

EXED

03/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date