2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006
Secretary of State

DOCUMENT# N99000005695

Entity Name: AMERICAN MUSLIM ASSOCIATION OF NORTH AMERICA, INC.

Current Principal Place of Business:

183 N E 166 STREET
MIAMI, FL 33162

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5212
MIAMI, FL 33014

New Mailing Address:

FEI Number: 65-1017494 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ZAKKOUT, SOFIAN
16012 KILMARNOCK DR
MIAMI, FL 33014 US

Name and Address of New Registered Agent:

ZAKKOUT, SOFIAN
16012 KILMARNOCK DRIVE
MIAMI, FL 33014 US

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: SOFIAN ZAKKOUT 05/02/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: ZAKKOUT, SOFIAN
Address: 16012 KILMARNOCK DR
City-St-Zip: MIAMI, FL 33014

Title: VPT ( ) Delete
Name: MUSTAFA, NASAR
Address: 929 N E 199 ST
City-St-Zip: MIAMI, FL 33179

Title: ST ( ) Delete
Name: TAHER, HISHAM
Address: 15898 KILMARNOCK DR
City-St-Zip: MIAMI, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPT (X) Change ( ) Addition
Name: MAHAMAD, RASHEED
Address: 7910 NW 19 STREET
City-St-Zip: MARGATE, FL 33063

Title: VP (X) Change ( ) Addition
Name: MUSTAFA, NASAR
Address: 929 N E 199 ST
City-St-Zip: MIAMI, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the 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: SOFIAN ZAKKOUT PTD 05/02/2006
Electronic Signature of Signing Officer or Director Date