

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N 99000006503

1. Entity Name

BANGLADESH ASSOCIATION OF SAITH FI- INC.

Principal Place of Business

Mailing Address

10250 SLEEPY BROOKWAY  
BOCA RATON, FI- 33428

SAME

2. Principal Place of Business

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NON PROFIT ORG.

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

00 AUG 30 PM 4:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAHMAN, MOHAM F

10250 SLEEPY BROOKWAY  
BOCA RATON FI-33428

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

M. F. Rahman (president)

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: President  
NAME: Moham F. Rahman  
STREET ADDRESS: 10250 SLEEPY BROOKWAY  
CITY-ST-ZIP: BOCA RATON FI-33428 ☐ Delete

TITLE: Director  
NAME: NANNU AHAMMED  
STREET ADDRESS: 10148 BORTON BEACH PT CIR.  
CITY-ST-ZIP: BORTON BEACH FI-33432 ☐ Change ☐ Addition

TITLE: Vice Pres  
NAME: Mohammed Ayub Khan  
STREET ADDRESS: 39E TARALKE DR. BORTON BEACH  
CITY-ST-ZIP: FI-33436 ☐ Delete

TITLE: Director  
NAME: Mohammed Siddique Rahman  
STREET ADDRESS: 450 N.W. 53RD ST.  
CITY-ST-ZIP: BOCA RATON FI-33428 ☐ Change ☐ Addition

TITLE: Director  
NAME: EKRAMUL ISLAM DHUIYAN  
STREET ADDRESS: 10148 BORTON BEACH PT CIR.  
CITY-ST-ZIP: BORTON BEACH FI-33432 ☐ Delete

TITLE: Director  
NAME: Salma Rahman Talukder  
STREET ADDRESS: 10250 SLEEPY BROOKWAY  
CITY-ST-ZIP: BOCA RATON FI-33428 ☐ Change ☐ Addition

TITLE: Director  
NAME: BUBUL CHOWDHURY  
STREET ADDRESS: 711 FOREST CLUB # 120  
CITY-ST-ZIP: WILMINGTON FI-33464 ☐ Delete

TITLE: ☐ Change ☐ Addition

TITLE: Director  
NAME: ATIQUR RAHMAN  
STREET ADDRESS: 2761 NE 27 CIR.  
CITY-ST-ZIP: BOCA RATON FI-33431 ☐ Delete

TITLE: ☐ Change ☐ Addition

TITLE: Director  
NAME: SOYAD HAHAM  
STREET ADDRESS: 5204 BAYSIDE, GREEN ACRES  
CITY-ST-ZIP: FI-33463 ☐ Delete

TITLE: ☐ 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:

M. F. Rahman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-30-00

Date

561-445-4635

Daytime Phone #

CR2E037 (9/99)