

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000000238

**FILED**  
**Feb 09, 2017**  
**Secretary of State**  
**CC3846544431**

**Entity Name:** NIGERIAN-AMERICAN YOUTH ORGANIZATION INC.

**Current Principal Place of Business:**

610 NW 183RD ST., SUITE 208  
MIAMI, FL 33169

**Current Mailing Address:**

610 NW 183RD ST., SUITE 208  
MIAMI, FL 33169

**FEI Number:** 02-0535791

**Certificate of Status Desired:** No

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

IBRAHEEM, PAT  
3310 NW 178TH STREET  
MIAMI, FL 33056 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title D  
Name AGBEYEGBE, PETER  
Address 2601 NW 123 STREET  
City-State-Zip: MIAMI FL 33167

Title D  
Name IBRAHEEM, PATRICIA  
Address 610 NW 183RD ST., SUITE 208  
City-State-Zip: MIAMI FL 33169

Title D  
Name JOSHUA, MARGARET  
Address 610 NW 183RD ST., SUITE 208  
City-State-Zip: MIAMI FL 33169

Title T  
Name IJINEH, MAYOWA  
Address 610 NW 183RD ST., SUITE 208  
City-State-Zip: MIAMI FL 33169

Title AS  
Name LAWAL, ERICA  
Address 610 NW 183RD ST., SUITE 208  
City-State-Zip: MIAMI FL 33169

*I hereby 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 all other like empowered.*

**SIGNATURE:** PATRICIA IBRAHEEM

D

02/09/2017

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date