

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000010573

Entity Name: HOUSE OF THE BELIEVERS, INC.**Current Principal Place of Business:**3607 OLEANDER AVE
FORT PIERCE, FL 34982**Current Mailing Address:**805 VIRGINIA AVE
STE 16
FORT PIERCE, FL 34982 US**FEI Number:** 81-4276677**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAHMAN, SYED SHAFEEQ UR
805 VIRGINIA AVE
STE 16
FORT PIERCE, FL 34982 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:** SYED SHAFEEQ UR RAHMAN

02/13/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	RAHMAN, SYED SHAFEEQ
Address	805 VIRGINIA AVE STE 16
City-State-Zip:	FORT PIERCE FL 34982

Title	TREASURER
Name	SHEIKH, MUHAMMAD
Address	11444 HIBBS GROVE DR
City-State-Zip:	COOPER CITY FL 33330

Title	DIRECTOR
Name	RAHMAN, SYED HASAAN UR
Address	4651 ELM AVE
City-State-Zip:	FORT PIERCE FL 34982

Title	VP
Name	RAHMAN, SYED HAMAAD UR
Address	4651 ELM AVE
City-State-Zip:	FORT PIERCE FL 34982

Title	SECRETARY
Name	KHAN, MOHAMMAD ALI
Address	10 ZINNIA CT
City-State-Zip:	BEAT DE 19701

Title	DTR
Name	KHAN, IMTIAZ
Address	805 VIRGINIA AVE STE 16
City-State-Zip:	FORT PIERCE, FL FL 34982

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: SYED SHAFEEQ UR RAHMAN**PRESIDENT**

02/13/2025

Electronic Signature of Signing Officer/Director Detail

Date