

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

DOCUMENT# N16000011636

**Entity Name:** NIGERIAN-AMERICAN PUBLIC AFFAIRS COMMITTEE  
FOUNDATION INC. FLORIDA

**FILED**  
**Apr 28, 2017**  
**Secretary of State**  
**CC9865240584**

**Current Principal Place of Business:**

1100 NE 125 STREET  
SUITE#107B  
N. MIAMI, FL 33161

**Current Mailing Address:**

1100 NE 125 STREET  
SUITE#107B  
N. MIAMI, FL 33161

**FEI Number: 81-4789664**

**Certificate of Status Desired: No**

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

SULEMAN, DANLADI  
1100 NE 125 STREET  
SUITE#107B  
N. MIAMI, FL 33161 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 P  
Name SULEMAN, DANLADI  
Address 1100 NE 125 STREET SUITE#107B  
City-State-Zip: N. MIAMI FL 33161

Title TREA  
Name TELLA, YINKA  
Address 1100 NE 125 STREET SUITE#107B  
City-State-Zip: N. MIAMI FL 33161

Title SEC  
Name AZEEZ, HAKEEM  
Address 1100 NE 125 STREET SUITE#107B  
City-State-Zip: N. MIAMI FL 33161

*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: DANLADI SULEMAN**

**PRESIDENT**

**04/28/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date