

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50370

**Entity Name:** ISLAMIC MOVEMENT OF FLORIDA, INC.

**Current Principal Place of Business:**

3201 N. 74TH AVE  
HOLLYWOOD, FL 33024

**Current Mailing Address:**

3201 N. 74TH AVE  
HOLLYWOOD, FL 33024 US

**FEI Number:** 65-0362777

**Certificate of Status Desired:** No

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

SAMAD, TALLIM  
3201 N. 74TH AVE  
HOLLYWOOD, FL 33024 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 PD  
Name KHAN, MOONEER  
Address 3801 EAST LAKE ESTATES DR.  
City-State-Zip: DAVIE FL 33328

Title D  
Name ALLY, ARKAN  
Address 440 NW 102ND TERRACE  
City-State-Zip: PEMBROKE PINES FL 33026

Title D  
Name MOHAMED, SONNY  
Address 2237 NW 77TH TERRACE  
City-State-Zip: PEMBROKE PINES FL 33024

Title D  
Name MOHAMED, MOIEN  
Address 8321 SW 20TH STREET  
City-State-Zip: MIRAMAR FL 33023

Title DD  
Name SAMAD, TALLIM  
Address 9660 BOULDER STREET  
City-State-Zip: MIRAMAR FL 33025

Title DIRECTOR  
Name MOHAMED, RIAD  
Address 6761 SW 13 TH STREET  
City-State-Zip: PEMBROKE PINES FL 33023

*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:** TALLIM SAMAD

**DIRECTOR**

**02/20/2014**

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

\_\_\_\_\_  
Date