

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 14, 2013
Secretary of State
CC2227186463

Entity Name: AL-MUHMIN ISLAMIC CENTER, INC.

Current Principal Place of Business:

2410 N.W. 93 STREET
MIAMI, FL 33147

Current Mailing Address:

P.O. BOX 691072
MIAMI, FL 33169 US

FEI Number: 65-0446430

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

OLAIGBE, OLA
2279 NW 126TH AVENUE
PEMBROKE PINES, FL 33028 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	SHOKUNBI, OLALEKAN
Address	20931 NE 13TH PLACE
City-State-Zip:	MIAMI FL 33179
Title	TT
Name	SALVADOR, RASAQ O
Address	4221 S.W. 21ST ST
City-State-Zip:	HOLLYWOOD FL 33023
Title	TFS
Name	MALIKI, NAJEEM
Address	15996 NW 12TH COURT
City-State-Zip:	PEMBROKE PINES FL 33028

Title	T
Name	IBRAHIM, LATEE F
Address	19621 NW 7TH COURT
City-State-Zip:	MIAMI FL 33179
Title	S
Name	LATEEFAT, ALABI
Address	15700 NW 2ND AVENUE #206
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: OLALEKAN SHOKUNBI

PRESIDENT

02/14/2013

Electronic Signature of Signing Officer/Director Detail

Date