

1.) CORPORATION NAME:

ISLAMIC CIRCLE OF NORTH AMERICA, VIRGINIA

DUE DATE: **4/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MOHAMMAD ZAHID KHAN
2913 WOODLAWN TRAIL
ALEXANDRIA, VA 22306**

SCC ID NO: **07076243**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2913 WOODLAWN TRAIL

CITY/ST/ZIP: ALEXANDRIA, VA 22306

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	RAMEEZ ABID	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	3129 SOUTHGATE DR APT 10		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		
NAME:	MOHAMMED YUSUF	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	13286 KENNY RD		
CITY/ST/ZIP/CO:	WOODBIDGE, VA 22193		
NAME:	MOHAMMED ZAHID KHAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7807 BELFORD DR #101		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		
NAME:	MAHMOOD AIJAZI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	13426 ALFRED MILL CT		
CITY/ST/ZIP/CO:	HERNDON, VA 20171		
NAME:	MOHAMMAD NAEEM BAIG	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	47517 SHARPSKIN ISLAND SQ		
CITY/ST/ZIP/CO:	STERLING, VA 20165		
NAME:	FAIZ CHOUDHRY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6800 LAMP POST LN		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		

NAME: MOHAMMAD HANIF ISMAIL TITLE: DIRECTOR ADDRESS: 2635 WILLIAM SHORT CIR APT 205 CITY/ST/ZIP/CO: HERNDON, VA 20171	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
--	----------------------------------	--

NAME: ZAHHEER UDDIN TITLE: DIRECTOR ADDRESS: 2913 WOODLAWN TR CITY/ST/ZIP/CO: ALEXANDRIA, VA 22306	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
---	----------------------------------	--

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ RAMEEZ ABID	RAMEEZ ABID, PRESIDENT	3/29/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.