

2017 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P13000099402

Entity Name: BDF INTEGRATED CORPORATION.**Current Principal Place of Business:**299 S MAIN STREET
WELLS FARGO CENTER SUITE# 1300
SALT LAKE CITY, UT 84111**Current Mailing Address:**425 COUNTY ROAD 39A
SOUTHAMPTON, NY 11968 US**FEI Number:** 46-4292901**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LAURA, MELLA
299 S MAIN ST
1300
SALT LAKE CITY, FL 84111 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:** LAURA MELLA

02/10/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BALDINGER, JOANNE
Address 425 COUNTY ROAD 39A
City-State-Zip: SOUTHAMPTON NY 11968

Title SECRETARY
Name MELLA, LAURA
Address 299 S MAIN STREET
 WELLS FARGO CENTER SUITE# 1300
City-State-Zip: SALT LAKE CITY UT 84111

Title CHAIRMAN
Name NURUDDOHA, SYED
Address 299 S MAIN STREET
 WELLS FARGO CENTER SUITE# 1300
City-State-Zip: SALT LAKE CITY UT 84111

Title DIRECTOR
Name DOHA, KASHMIR IBNE
Address 299 S MAIN STREET
 WELLS FARGO CENTER SUITE# 1300
City-State-Zip: SALT LAKE CITY UT 84111

Title MANAGING DIRECOR
Name MELLA, LAURA
Address 299 S MAIN STREET
 WELLS FARGO CENTER SUITE# 1300
City-State-Zip: SALT LAKE CITY UT 84111

Title CEO
Name NURUDDOHA, SYED
Address 299 S MAIN ST
 1300
City-State-Zip: SALT LAKE CITY UT 84111

Title DIRECTOR
Name DOHA, ILMAS IBNE
Address 299 S MAIN STREET
 WELLS FARGO CENTER SUITE# 1300
City-State-Zip: SALT LAKE CITY UT 84111

Title ACTING COO
Name DOHA, KASHMIR IBNE
Address 425 COUNTY ROAD 39A
City-State-Zip: SOUTHAMPTON NY 11968

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAURA MELLA**DIRECTOR**

02/10/2017

Electronic Signature of Signing Officer/Director Detail

Date