

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000003744

FILED
Oct 29, 2008
Secretary of State

Entity Name: SAUDI AMERICAN HOLDINGS, CORP.

Current Principal Place of Business:

110 BROWARD BLVD, STE 1700
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

729 NW 1ST STREET
FORT LAUDERDALE, FL 33311

Current Mailing Address:

110 BROWARD BLVD, STE 1700
FORT LAUDERDALE, FL 33301

New Mailing Address:

729 NW 1ST STREET
FORT LAUDERDALE, FL 33311

FEI Number: 88-0422026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, STE 4
WESTON, FL 33371 US

Name and Address of New Registered Agent:

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: BRADFORD VAN SICLEN

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CARRATHERS, DAVID
Address: 110 BROWARD BLVD, STE 1700
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: DSVP () Delete
Name: VAN SICLEN, BRADFORD
Address: 110 BROWARD BLVD, STE 1700
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: DSVP () Delete
Name: AL ZAHRANI, HASSAN
Address: 110 BROWARD BLVD, STE 1700
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DSVP (X) Change () Addition
Name: VAN SICLEN, BRADFORD
Address: 729 NW 1ST STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: DSVP (X) Change () Addition
Name: MARSENISON, MATTHEW
Address: 729 NW 1ST STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: DSVP (X) Change () Addition
Name: AL ZAHRANI, HASSAN
Address: 729 NW 1ST STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRADFORD VAN SICLEN

Electronic Signature of Signing Officer or Director

DSVP

10/29/2008

Date