

FILED
Mar 03, 2008 08:00 A
Secretary of State

SHAHMOHAMMADI, INC.



Principal Place of Business
% BAHAMAN SHAHMOHAMMADI
2403 S. FEDERAL HWY.
BOYNTON BEACH, FL 33435-7719

Mailing Address
% PAMELA SHAHMOHAMMADI
2403 S. FEDERAL HWY.
BOYNTON BEACH, FL 33435-7719



02292008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2378696	Applied For Not Applicable
5. Certificate of Status Desired <i>P</i>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHAHMOHAMMADI, PAMELA
2403 SOUTH FEDERAL HIGHWAY
BOYNTON BEACH, FL 33435

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000845553
03/14/08-80002-018 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHAHMOHAMMADI, BAHMAN 9627 CALIANDRA DR. BOYNTON BCH, FL 33436
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHAHMOHAMMADI, PAMELA 9627 CALIANDRA DR. BOYNTON BCH, FL 33436
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Pamela Shahmohammadi*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #