

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# J67714

Entity Name: FMAOA, INC

FILED
Jul 29, 2009
Secretary of State

Current Principal Place of Business:

681 NW 133RD WAY
PLANTATION, FL 33325

New Principal Place of Business:

Current Mailing Address:

681 NW 133RD WAY
PLANTATION, FL 33325

New Mailing Address:

FEI Number: 59-2809329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALEH, MUSTAFA
681 NW 133RD WAY
PLANTATION, FL 33325 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: MUSTAFA SALEH

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: DR () Delete
Name: SALEH, MUSTAFA
Address: 681 NW 133RD WAY .
City-St-Zip: PLANTATION, FL 33325

Title: MR (X) Delete
Name: SALEH, RAHMAN
Address: 681 NW 133RD WAY
City-St-Zip: PLANTATION, FL 33325

Title: MR (X) Delete
Name: SALEH, OMAR
Address: 681 NW 133RD WAY
City-St-Zip: PLANTATION, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SALEH, MUSTAFA
Address: 681 NW 133RD WAY .
City-St-Zip: PLANTATION, FL 33325

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MUSTAFA SALEH

P

07/29/2009

Electronic Signature of Signing Officer or Director

Date