

## **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P00000012046

Entity Name: SASA BUILDERS INC.

**FILED**  
**Oct 30, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

2828 MICHIGAN AVE  
SUITE 114  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 450718  
KISSIMMEE, FL 34745

**New Mailing Address:**

FEI Number: 59-3660429

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PETER LEONI  
2828 MICHIGAN AVE  
SUITE 114  
KISSIMMEE, FL 34744 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BUTT, NADIA U  
Address: P.O. BOX 450718 N/A  
City-St-Zip: KISSIMMEE, FL 34745

Title: VP ( ) Delete  
Name: MOHAMMED AMEEN,  
Address: P.O. BOX 450718 N/A  
City-St-Zip: KISSIMMEE, FL 34745

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: AHMED, NEELAM S  
Address: P.O. BOX 450718 N/A  
City-St-Zip: KISSIMMEE, FL 34745

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: NEELAM S AHMED

P

10/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date