

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000069070

Entity Name: CHOWDHURY AND CHOWDHURY, INC.

FILED
Oct 04, 2006
Secretary of State

Current Principal Place of Business:

822 N. CHARLESTON AVENUE
FORT MEADE, FL 33841

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1195
AVON PARK, FL 33826 US

New Mailing Address:

822 N. CHARLESTON AVENUE
FORT MEADE, FL 33841 US

FEI Number: 59-3657437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHOWDHURY, M. AZAM
P.O. BOX 1195
AVON PARK, FL 33826 US

Name and Address of New Registered Agent:

CHOWDHURY, M. AZAM
822 N. CHARLESTON AVENUE
FORT MEADE, FL 33841 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: MOHAMMED A. CHOWDHURY

10/04/2006

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: CHOWDHURY, M. AZAM
Address: P.O. BOX 1195
City-St-Zip: AVON PARK, FL 33826 US

Title: STD () Delete
Name: CHOWDHURY, MOHAMMAD N
Address: P.O. BOX 1195
City-St-Zip: AVON PARK, FL 33826 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHOWDHURY, M. AZAM
Address: 8609 S BAY DRIVE
City-St-Zip: ORLANDO, FL 32819 US

Title: STD (X) Change () Addition
Name: CHOWDHURY, MOHAMMAD N
Address: 822 N. CHARLESTON AVENUE
City-St-Zip: FORT MEADE, FL 33841 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MOHAMMAD N. CHOWDHURY

D

10/04/2006

Electronic Signature of Signing Officer or Director

Date