

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P01000077924

Entity Name: SNF, INCORPORATED

**FILED**  
**Oct 27, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

1460 NE 137 STREET  
NORTH MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

1460 NE 137 STREET  
NORTH MIAMI, FL 33161

**New Mailing Address:**

FEI Number: 65-1128365

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HASEB, ABUL  
1460 NE 137 STREET  
NORTH MIAMI, FL 33161 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: ABUL HASEB

\_\_\_\_\_  
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: HASEB, ABUL  
Address: 1460 NE 137 STREET  
City-St-Zip: NORTH MIAMI, FL 33161

Title: VD ( ) Delete  
Name: HASEB, SOHELI  
Address: 1460 NE 137 STREET  
City-St-Zip: NORTH MIAMI, FL 33161

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

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: ABUL HASEB

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

PD

10/27/2008

\_\_\_\_\_  
Date