
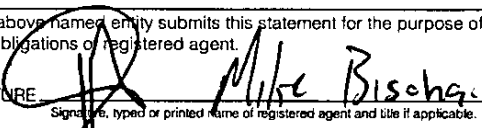
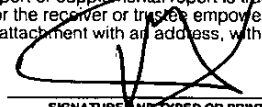


2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000031990					
1. Entity Name BISAHA HOMES AND DEVELOPMENT CORP					
Principal Place of Business 1581 MELLON WAY SARASOTA, FL 34232 US			Mailing Address 1581 MELLON WAY SARASOTA, FL 34232 US		
2. Principal Place of Business 15		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number NOT APPLICABLE	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BISAHA, MIKE E 1581 MELLON WAY SARASOTA, FL 34232			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;"> SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 30%; text-align: center;"> <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 20%; text-align: right;"> 12/19/05 <small>DATE</small> </div> </div>					
FILE NOW!!! FEE IS \$150.00 After January 1, 2006, Fee will be \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BISAHA, MIKE E SR 1581 MELLON WAY SARASOTA, FL 34232	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BISAHA, KEITH S SR 2192 BORDER RD VENICE, FL 34292	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BISAHA, KATHY B MS 2192 BORDER RD VENICE, FL 34292	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RD LUIS, WILLIAM J SR 1581 MELLON WAY SARASOTA, FL 34232	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<div style="display: flex; justify-content: space-between;"> <div> 12/18/05 <small>Date</small> </div> <div> 941-780-3393 <small>Daytime Phone #</small> </div> </div>					

FILED

05 DEC 22 PM 3:00



REINSTATEMENT 2005
12192005 REIN: P CR2E098 (6/04)

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Applied For
Not Applicable

FL

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01/19/06--01011--003 **150.00