2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000119354

City-St-Zip:

LAKE WORTH, FL 33461

FILED Oct 10, 2005 Secretary of State

Entity Name: SONALI BANGLA, INC. **Current Principal Place of Business: New Principal Place of Business:** 16460 NE 16TH AVENUE N. MIAMI BEACH, FL 33162 **Current Mailing Address: New Mailing Address:** 16460 NE 16TH AVENUE N. MIAMI BEACH, FL 33162 FEI Number: 20-0403616 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ZAMAN, MOHAMMAD 16460 NE 16TH AVENUE N. MIAMI BEACH, FL 33162 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: MOHAMMAD ZAMAN 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition ZAMAN, MOHAMMAD Name: Name: 7545 E. TREASURE DR. #5B Address: Address: City-St-Zip: N. BAY VILLAGE, FL 33140 City-St-Zip: () Delete Title: VPD Title: () Change () Addition Name: HOSSAIN, MOHAMMED Z Name: 537 SHADY PINE WAY #A-1 Address: Address: WEST PALM BEACH, FL 33415 City-St-Zip: City-St-Zip: Title: Title: STD () Delete () Change () Addition KHAN, RAJIB H Name: Name: 232 SPRINGDALE CIRCLE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: MOHAMMAD ZAMAN PD 10/10/2005