2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000120162

ZAHID, SULTANA

3480 SNOWBELL CT

ORLANDO, FL 32810 US

Name:

Address:

City-St-Zip:

FILED Mar 22, 2008 Secretary of State

Entity Nan	ne: MALIHA	AINC				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
3408 SNO\ ORLANDO	WBELL CT , FL 32810	US				
Current M	ailing Addro	ess:	New Mailir	ng Address:		
3408 SNO\ ORLANDO	WBELL CT , FL 32810	US				
FEI Number:	20-5855510	FEI Number Applied For ()	FEI Number Not Appli	licable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:		
HOSSAIN, 3408 SNO\ ORLANDO		US				
The above in the State		y submits this statement for the	purpose of changing it	ts registered office or registered agent, or both,		
SIGNATUR	RE: ALAMG	IR HOSSAIN				
	Electro	onic Signature of Registered Ag	ent	Date		
		193(2)(b), F.S., the corporation did ning Trust Fund Contribution ().	ot receive the prior notice	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P (HOSSAIN, AL 3480 SNOWE ORLANDO, F	BELL CT	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP (BEGUM, SAB 3480 SNOWE ORLANDO, F	BELL CT	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	S (HOSSAIN, SA 3480 SNOWE ORLANDO, F	BELL CT	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (ZAMAN, NAZI 3480 SNOWE ORLANDO, F	BELL CT	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition ZAMAN, NAZMA 6701 MERLIN CT ORLANDO, FL 32810 US		
Title:	D (() Delete	Title:	D (X) Change () Addition		

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.

Name:

Address:

City-St-Zip:

ZAHID, SULTANA

205 SOUTH NERSARY ROAD

LEESBURG, FL 34748 US

SIGNATURE: ALAMGIR HOSSAIN P 03/22/2008