

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 JAN - 3 AM 8:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # POS000101578

1. Corporation Name

SAHER'S INC.

W07-57978

2. Principal Office Address - No P.O. Box #

2360 W 68 ST

Suite, Apt. #, etc.

SUITE #130

City & State

HALEAH FL

Zip

33016

Country

USA

3. Mailing Office Address

2360 W 68 ST

Suite, Apt. #, etc.

#130

City & State

HALEAH FL

Zip

33016

Country

USA

REINSTATEMENT 06-08

CR2E081 (1/07)

4. Date Incorporated or Qualified
To Do Business in Florida

11/15/07 9/15/06

5. FEI Number

203189165

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

NAEEM KHAN

Street Address (P.O. Box Number is Not Acceptable)

2360 W 68 ST #130

Suite, Apt. #, Etc.

City

HALEAH

State

FL

Zip Code

33016

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

NAEEM KHAN

NAEEM KHAN

Date

11/15/07

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
VP President	NAEEM KHAN	2360 W 68 ST #130	HALEAH, FL 33016
	Isaura Khan	2360 W. 68 ST #130	HALEAH, FL 33016
			200115398872 01/17/08--01034--008 **300.00
			200115398872 01/17/08--01034--009 **150.00
			2/1/9

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NAEEM KHAN

12/08/07

Date

786 2605220

Daytime Phone #