

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000114701

Entity Name: TASNIM FOOD, INC.

FILED
Mar 16, 2009
Secretary of State

Current Principal Place of Business:

650 STATE ROAD 436
CASSELBERRY, FL 32707 US

New Principal Place of Business:

Current Mailing Address:

650 STATE ROAD 436
CASSELBERRY, FL 32707 US

New Mailing Address:

FEI Number: 20-5493701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHAN, MAHBUB
1798 LAUREL BROOK LOOP
CASSELBERRY, FL 32707 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: AKTER, NAZMA
Address: 1798 LAUREL BROOK LOOP
City-St-Zip: CASSELBERRY, FL 32707 US

Title: VP () Delete
Name: KHAN, MAHBUB
Address: 1798 LAUREL BROOK LOOP
City-St-Zip: CASSELBERRY, FL 32707 US

Title: TR () Delete
Name: MOSTAFA, MIZAN
Address: 2 SYCAMORE COURT
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: SEC () Delete
Name: BHUIYAN, SHAIFUL
Address: 1007 VIACOMO PLACE
City-St-Zip: LAKE MARY, FL 32746 US

Title: TR () Delete
Name: SURAYA, BEGOM
Address: 248 MAGNOLIA PARK TR
City-St-Zip: SANFORD, FL 32773 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: MOSTAFA, MIZAN
Address: 2 SYCAMORE COURT
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: TR (X) Change () Addition
Name: CHOWDHURY, MARINA
Address: 650 STATE ROAD 436
City-St-Zip: CASSELBERRY, FL 32707 US

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: MARINA CHOWDHURY

TR

03/16/2009

Electronic Signature of Signing Officer or Director

Date