

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000138615

Entity Name: SAI INC. OF WILDWOOD

FILED
Oct 30, 2008
Secretary of State

Current Principal Place of Business:

273 E STATE RD 44
WILDWOOD, FL 34785

New Principal Place of Business:

Current Mailing Address:

273 E STATE RD 44
WILDWOOD, FL 34785

New Mailing Address:

FEI Number: 37-1531403

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, PRITESH
273 E STATE RD 44
WILDWOOD, FL 34785 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: PRITESH PATEL

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:

Title: D () Delete
Name: PATEL, PRITISH
Address: 273 E STATE RD 44
City-St-Zip: WILDWOOD, FL 34785

Title: D () Delete
Name: PATEL, MEENABEN
Address: 273 E STATE RD 44
City-St-Zip: WILDWOOD, FL 34785

Title: D () Delete
Name: PATEL, JAYANTIBHAI
Address: 273 E STATE RD 44
City-St-Zip: WILDWOOD, FL 34785

Title: D () Delete
Name: PATEL, HETAL
Address: 273 E STATE RD 44
City-St-Zip: WILDWOOD, FL 34785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: PRITESH PATEL

D

10/30/2008

Electronic Signature of Signing Officer or Director

Date