

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000066021

**Entity Name:** FAHADA SAAD P.A.

**Current Principal Place of Business:**

1915 COCOPLUM WAY  
NAPLES, FL 34105

**Current Mailing Address:**

1915 COCOPLUM WAY  
NAPLES, FL 34105

**FEI Number:** 20-0023977

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SAAD, FAHADA M  
1915 COCOPLUM WAY  
NAPLES, FL 34105 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title	P	Title	ST
Name	SAAD, FAHADA M	Name	SAAD, SAM J
Address	1915 COCOPLUM WAY	Address	1915 COCOPLUM WAY
City-State-Zip:	NAPLES FL 34105	City-State-Zip:	NAPLES FL 34105

*I hereby 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 all other like empowered.*

**SIGNATURE:** FAHADA SAAD

**PRESIDENT**

**02/27/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date