

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000112985

**Entity Name:** EHAB SH. ABU-HALIMEH, P.A.

**Current Principal Place of Business:**

6156 BUFORD ST.  
ORLANDO, FL 32835

**Current Mailing Address:**

PO BOX 617414  
ORLANDO, FL 32861

**FEI Number:** 34-2008610

**Certificate of Status Desired:** No

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

HALIMEH, EHAB  
6156 BUFORD ST.  
ORLANDO, FL 32835 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 PSTD  
Name SH. ABU-HALIMEH, EHAB  
Address P.O. BOX 617414  
City-State-Zip: ORLANDO FL 32861

*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:** SH. ABU-HALIMEH , EHAB

**PRESIDENT**

**01/13/2014**

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

\_\_\_\_\_  
Date