

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90144 017 ****61.25

DOCUMENT # 754515

1. Entity Name
ARAB-AMERICAN CULTURAL CENTER, INC.



Principal Place of Business
3326 PONCE DE LEON BLVD #140
CORAL GABLES, FL 33134-7110 US

Mailing Address
3619 SW 42ND AVE.
MIAMI, FL 33134-7110 US

2. Principal Place of Business
3326 Ponce de Leon Blvd #140
Suite, Apt. #, etc.
#140

3. Mailing Address
3619 SW 42ND AVE #140
Suite, Apt. #, etc.
MIAMI 33134

City & State
CORAL GABLES

City & State
MIAMI FL

Zip
33134 Country
USA

Zip
33134 Country
USA

04202006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-2088198

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GHAW, ELIAS
6130 SW 93 AVE
MIAMI, FL 33173

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
CORY, C.
6000 SW 30 ST
MIAMI, FL 33155 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
WARWAR, YOLA
3619 SW 42 AVE
MIAMI, FL 331347110 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
SHALHUB, DON
6380 SW 44TH ST
MIAMI, FL 33155 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
COREY, FLORENCE
6000 S W 30 ST
MIAMI, FL 33155 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P/D
GHAWI, ELIAS
6130 S.W. 93 AVE.
MIAMI, FL 33173 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
BELLAMY, A.M.
291 W. 59 ST
HIALEAH, FL 33012 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
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CITY - ST - ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/06 305-555-5558