

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 13, 2005 8:00 am
Secretary of State

DOCUMENT # F81790

1. Entity Name

FLEXIBLE BUSINESS SYSTEMS, INC.



04-13-2005 90087 001 ***150.00

04-13-2005 90087 002 *****8.75

Principal Place of Business

8401 N.W. 53 TERRACE
SUITE #114
MIAMI FL 33166
US

Mailing Address

8401 N.W. 53 TERRACE
SUITE #114
MIAMI FL 33166
US

2. Principal Place of Business

10803 N.W. 29 STREET
Suite, Apt. #, etc.

3. Mailing Address

10803 N.W. 29 STREET
Suite, Apt. #, etc.



1st MOORE

CR2E034 (10/04)

City & State

DORAL, FLORIDA

City & State

DORAL, FLORIDA

4. FEI Number

59-2196989

Applied For

Not Applicable

Zip

33172

Country

U.S.

Zip

33172

Country

U.S.

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KHALIL, JOSEPH ABOU
8401 N.W. 53 TERRACE SUITE #114
SUITE 103
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name

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

10803 N.W. 29 STREET

City

DORAL,

FL

Zip Code

33172

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

JOSEPH KHALIL

4-1-05

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCM
KHALIL, JOSEPH A
8401 N.W. 53 TERRACE #114
MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
KHALIL, SIMONE A
8401 N.W. 53 TERRACE #114
MIAMI FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CIO
ALAIN, KHALIL A
8601 NW 53 TERRACE 114
MIAMI FL 33166 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
10803 N.W. 29 STREET
DORAL, FL 33172

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

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CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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:

JOSEPH KHALIL

4-1-05 (805) 594-0550

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #