

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
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Secretary of State

04-04-2008 90013 034 ****70.00

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1. Entity Name

SOULS SALVATION ASSEMBLY INC.



Principal Place of Business

610 N-H-STREET APT. 4A
LAKE WORTH FL 33460

Mailing Address

P.O. BOX 967
LAKE WORTH FL 33460

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number
02-0741667

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KHALIL, MAHROUS
610 N-H-STREET APT. 4A
LAKE WORTH FL 33460

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

FILE NOW: FEE IS \$61.25
Due By: May 1, 2008

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 P
NAME DEMETRIOUS, ADEL DR. ☐ Delete
STREET ADDRESS 69 WEST GRANDA BLVD.
CITY-ST-ZIP ORMOND BEACH FL 32174

TITLE V
NAME MIKHAIL, GEORGE ☐ Delete
STREET ADDRESS 1756 TRIBUTORY LANE
CITY-ST-ZIP PORT ORANGE FL 32128

TITLE T
NAME ARMANIOUS, SHOKRI ☐ Delete
STREET ADDRESS 108 WEYBRIDGE CIRCLE
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE VTS
NAME INDARAWIS, MONEERA ☐ Delete
STREET ADDRESS 610 N-H-STREET APT. 4A
CITY-ST-ZIP LAKE WORTH FL 33460

TITLE VS
NAME KHALIL, MAHROUS K ☐ Delete
STREET ADDRESS 610 N-H-STREET APT. 4A
CITY-ST-ZIP LAKE WORTH FL 33460

TITLE VS
NAME FEREG, KAMAL M ☐ Delete
STREET ADDRESS 496 PELICAN LANE L
CITY-ST-ZIP JUPITER FL 33458

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Change ☐ Addition
NAME DEMETRIOUS ADEL DR.
STREET ADDRESS 69 WEST GRANDA BLVD.
CITY-ST-ZIP ORMOND BEACH FL 32174

TITLE VP ☐ Change ☐ Addition
NAME SAMI MANSOUR
STREET ADDRESS 6857 HENDRY DR.
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE T ☐ Change ☐ Addition
NAME MAHROUS KHALIL
STREET ADDRESS 610 N-H STREET APT. 4A
CITY-ST-ZIP LAKE WORTH FL 33460

TITLE VT ☐ Change ☐ Addition
NAME SHOKRI ARMANIOUS
STREET ADDRESS 108 WEYBRIDGE CIRCLE
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE S ☐ Change ☐ Addition
NAME ELLIA GIRGIS
STREET ADDRESS 2049 POLO GARDENS DR. APT. 201
CITY-ST-ZIP WILLINGTON FL 33414

TITLE VS ☐ Change ☐ Addition
NAME KAMAL M. FEREG
STREET ADDRESS 496 PELICAN LANE L
CITY-ST-ZIP JUPITER FL 33458

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Mahrous Khalil

03.24.08