

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000003347

**FILED**  
**Feb 27, 2012**  
**Secretary of State**

**Entity Name:** LEBANESE LANGUAGE INSTITUTE, INC

**Current Principal Place of Business:**

24325 LANDING DRIVE  
LUTZ, FL 33559

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 194  
LUTZ, FL 33548

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

FADDOUL, ANTOINE G  
24325 LANDING DRIVE  
LUTZ, FL 33559 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: FADDOUL, ANTOINE G  
Address: 24325 LANDING DRIVE  
City-St-Zip: LUTZ, FL 33559

Title: SECR  
Name: BOURJAILI, HICHAM  
Address: 84 MOUNTAIN LAUREL DRIVE  
City-St-Zip: WETHERSFIELD, CT 06109

Title: TRES  
Name: KHOURY, JOSEPH  
Address: 9146 REGENTS RD, APT F  
City-St-Zip: LA JOLLA, CA 92037

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTOINE FADDOUL

PRES

02/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date