2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Jan 24, 2007 8:00 am **Secretary of State** DOCUMENT # N41744 01-24-2007 90048 008 ****70.00 AMERICAN LEBANESE ENGINEERING SOCIETY, INC. Principal Place of Business Mailing Address 3700 34TH ST 3700 34TH ST 60006029 3RD FLOOR 3RD FLOOR ORLANDO, FL 32805 ORLANDO, FL 32805 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01172007 Chq-NP CR2E037 (12/06) 4. FEI Number 59-3058418 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HARB, AMINE T Street Address (P.O. Box Number is Not Acceptable) 3700 34TH STREET SUITE 300 ORLANDO, FL 32805 City Zip Code FL 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE D TITLE ☐ Delete X Change Addition ABICHAKER, DAVID NAME NAME STREET ADDRESS 123 WREN ST STREET ADDRESS WEST ROXBURY, MA DAI32 CITY-ST-ZIP BOSTON, MA 02132 CITY-ST-ZIP TITLE 🔼 Delete TITLE Change **Addition** -DAYMA, HANI À OLD STAGE ROAD ELMSFORD, MA 01824 SEBAALI, SAM NAME NAME 401 HARBOUR OAKS PT DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32819 CITY-ST-ZIP TITLE X Delete TITLE ☐ Change X Addition ÁYAS, SALIM A AL PARK AVENUE WEBSTER, MA OISTO NACHABE, MAHMOOD NAME NAME STREET ADDRESS 4202 E FOWLER AVE ENB 118 STREET ADDRESS TAMPA, FL 33620 CITY-ST-ZIP CITY-ST-ZIP Change TITLE Delete TITLE □ Addition HOURANI, NABIL NAME NAME 443 E. FOXBORO STREET STREET ADDRESS 700 EAST GATE DR #201 STREET ADDRESS SHARON, MA 02067 CITY-ST-ZIP MOUNT LAUREL, NJ 08054 CITY-ST-ZIP

DUX BURY 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 of 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.

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE

BOUFADEL, MICHEL C

PHILADELPHIA, PA 19122

1947 N 12TH STREET

TITLE

NAME

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NAME STREET ADDRESS

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