

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41744

FILED  
Mar 03, 2009  
Secretary of State

**Entity Name:** AMERICAN LEBANESE ENGINEERING SOCIETY, INC.

**Current Principal Place of Business:**

3700 34TH ST  
3RD FLOOR  
ORLANDO, FL 32805 US

**New Principal Place of Business:**

3700 34TH ST  
SUITE 300  
ORLANDO, FL 32805 US

**Current Mailing Address:**

3700 34TH ST  
3RD FLOOR  
ORLANDO, FL 32805 US

**New Mailing Address:**

3700 34TH ST  
SUITE 300  
ORLANDO, FL 32805 US

**FEI Number:** 59-3058418

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HARB, AMINE T  
3700 34TH STREET  
SUITE 300  
ORLANDO, FL 32805 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: D ( ) Delete  
Name: ABICHAKE, DAVID  
Address: 123 WREN ST  
City-St-Zip: WEST ROXBURY, MA 02132

Title: S ( ) Delete  
Name: BIJJANI, MICHELLE  
Address: 1 MYONE STREET  
City-St-Zip: METHUEN, MA 01844

Title: P ( ) Delete  
Name: AYAS, SALIM A  
Address: 21 PARK AVE.  
City-St-Zip: WEBSTER, MA 01570

Title: D ( ) Delete  
Name: HOURANI, NABIL  
Address: 443 E FOXBORO ST  
City-St-Zip: SHARON, MA 02067

Title: T ( ) Delete  
Name: ELDAMAA, CHAFIC R  
Address: 281 CANTON ST  
City-St-Zip: WESTWOOD, MA 02090

Title: V ( ) Delete  
Name: NAJJAR, SAMER  
Address: 310 PARKS ST  
City-St-Zip: DUXBURY, MA 02332

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: AMINE T HARB

RA

03/03/2009

Electronic Signature of Signing Officer or Director

Date