2005 FOR PROFIT CORPORATION ANNUAL REPORT ..

changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

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OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 09, 2005 08:00 AM Secretary of State DOCUMENT # P02000111401 1. Enlity Name GHABBOUR INVESTMENT, INC. Principal Place of Business Mailing Address 1319 CALADESI DR. 1319 CALADESI DR. ZEPHYRHILLS, FL 33543 ZEPHYRHILLS, FL 33543 US 02152005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 55-0801253 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GHABBOUR, GHABBOUR R DO NOT WRITE 1319 CALADESI DR. ZEPHYRHILLS, FL 33543 IN THIS SPACE 3. 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) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 UQ00Q0256495 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 03/09/05-80008-007 150.00 OFFICERS AND DIRECTORS 10. TITLE GHABBOUR, GHABBOUR R NAME 1319 CALADESI DR. STREET ADDRESS CITY-ST-ZIP ZEPHYRHILLS, FL 33543 VP/T TITLE GHABBOUR, AIDA G NAME STREET ADDRESS 1319 CALADESI DR. ZEPHYRHILLS, FL 33543 CITY - ST- 7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(f), 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

FILED

Daytime Phone #