


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000111401
1. Entity Name
GHABBOUR INVESTMENT, INC.



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| Principal Place of Business 1319 CALADESI DR. ZEPHYRHILLS, FL 33543 US | Mailing Address 1319 CALADESI DR. ZEPHYRHILLS, FL 33543 US |
|--|--|



03222006 No Chg-P CR2E034 (11/05)

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|-----------------------------|-------------------------------|
| 4. FEI Number 55-0801253 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

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

6. Name and Address of Current Registered Agent
GHABBOUR, GHABBOUR R
1319 CALADESI DR.
ZEPHYRHILLS, FL 33543

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

U00000480461
04/10/06 80844-019 150.00

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P GHABBOUR, GHABBOUR R 1319 CALADESI DR. ZEPHYRHILLS, FL 33543 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP/ST GHABBOUR, AIDA G 1319 CALADESI DR. ZEPHYRHILLS, FL 33543 |
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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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. Ghabbour Date: 3/22/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #