

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

06 JUN 16 AM 8:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # P05000029178		
1. Entity Name NABEEL PHOTO PROCESSING INC.		

Principal Place of Business 7105 WEST 12TH AVE STE 7 HIALEAH, FL 33014 US	Mailing Address 7105 WEST 12TH AVE STE 7 HIALEAH, FL 33014 US
--	--

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02162006 Chg-P CR2E034 (11/05)

4. FEI Number <b>20-2383803</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  ZAKI, FURRUKH 7105 WEST 12TH AVE STE 7 HIALEAH, FL 33014		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
--	--	---	--

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

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ZAKI, FURRUKH 7105 WEST 12TH AVE, STE 7 HIALEAH, FL 33014 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>800076704848</b> 06/29/06--01019--002 **\$150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S <del>ZAKI, AHMED</del> <del>7105 WEST 12TH AVE, STE 7</del> <del>HIALEAH, FL 33014</del> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>800076704848</b> 06/29/06--01019--003 **\$8.50
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

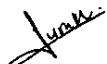
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date <b>05-01-06</b>	Daytime Phone #
--	-------------------------	-----------------

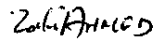
**NABEEL PHOTO PROCESSING INC**  
**7105 WEST 12<sup>TH</sup> AVE STE 7**  
**HIALEAH FLORIDA 33014**

To Whom It May Concern:

Mr. Zaki Ahmed with SS No. 592-68-5587 and Florida Drivers License No. A530-980-54-408-7 actually residing at 1280 West 54<sup>th</sup> street Apt B105, City of Hialeah Florida 33012, has no concern with Nabeel Photo Processing Inc. with Sales and Use Tax No. 23-8013325062-9, since he had resign on December 19, 2005. In the future if he deal with any one, Nabeel Photo Processing Inc. is not responsible for his act.

Cordially,

  
Furrukh Zaki  
President

  
Zaki Ahmed  
Vice-President

---

State of Florida  
County of Dade


Sworn and subscribed before me Notary Public for the State of Florida, today December 14, 2005.

  
Notary Public

My Commission expire:



Rafael R. Martinez  
My Commission DD308438  
Expires May 09, 2008

 **IRS** DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
P.O. BOX 9003  
HOLTSVILLE NY 11742-9003

000369.166236.0003.001 2 AT 0.517 1228

|||||



NABEEL PHOTO PROCESSING INC  
7105 W 12TH AVE STE 7  
HIALEAH FL 33014

000369

*COPY* *FEID No. 1* X

Date of this notice: 03-09-2005

Employer Identification Number:  
20-2383803

Form: SS-4

Number of this notice: CP 575 A

For assistance you may call us at:  
1-800-829-4933

IF YOU WRITE, ATTACH THE  
STUB OF THIS NOTICE.

#### WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an EIN. We assigned you EIN 20-2383803. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label IRS provided. If that isn't possible you should use your EIN and complete name and address shown above on all federal tax forms, payments and related correspondence. If this information isn't correct, please correct it using the tear off stub from this notice. Return it to us so we can correct your account. If you use any variation of your name or EIN, doing so could cause a delay in processing and may result in incorrect information in your account. Doing so could result in our assigning you more than one EIN.

Based on the information from you or your representative, you must file the following form(s) by the date shown next to it.

Form 941	04/30/2005
Form 1120	03/15/2006
Form 940	01/31/2006

If you have questions about the form(s) or the due date(s) shown, you can call us at 1-800-829-4933 or write to us at the address at the top of the first page of this letter. If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office or from our web site at [www.irs.gov](http://www.irs.gov).

We assigned you a tax classification (S-Corporation, Partnership, etc.) based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a determination of your tax classification, you may seek a private letter ruling from the IRS under the procedures set forth in Revenue Procedure 98-01, 1998-1 I.R.B.7 (or superceding revenue procedure for the year at issue.)