

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000133608

FILED
Apr 06, 2006
Secretary of State

Entity Name: OCCASIONS BANQUET HALL, INC.

Current Principal Place of Business:

10301 BISCAYNE BLVD.
AVENTURA, FL 33180

New Principal Place of Business:

20301 BISCAYNE BLVD.
AVENTURA, FL 33180

Current Mailing Address:

6619 SW 192ND AVE
PEMBROKE PINES, FL 33332

New Mailing Address:

20301 BISCAYNE BLVD.
AVENTURA, FL 33180

FEI Number: 20-3806964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAIBI, HAIM
6619 SW 192ND AVE
PEMBROKE PINES, FL 33332 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAIBI, HAIM
Address: 6619 SW 192ND AVE
City-St-Zip: PEMBROKE PINES, FL 33332

Title: VP () Delete
Name: HAIBI, AVI
Address: 6619 SW 192ND AVE
City-St-Zip: PEMBROKE PINES, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAIM HAIBI

PRES

04/06/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date