

# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000101522

Entity Name: HABIB HOLDINGS, INC.

FILED  
Oct 29, 2008  
Secretary of State

## Current Principal Place of Business:

8849 LATREC AVE  
SUITE 310, APT# 4  
ORLANDO, FL 32819 US

## New Principal Place of Business:

## Current Mailing Address:

8849 LATREC AVE  
SUITE 310, APT# 4  
ORLANDO, FL 32819 US

## New Mailing Address:

FEI Number: 86-1174963      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HABIB, IMTIAZ  
8849 LATREC AVE  
SUITE 310, APT#4  
ORLANDO, FL 32819 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: PVST ( ) Delete  
Name: HABIB, IMTIAZ  
Address: 8849 LATREC AVE, SUITE310, APT#4  
City-St-Zip: ORLANDO, FL 32819 US

Title: D ( ) Delete  
Name: HABIB, BOBBY I  
Address: 8849 LATREC AVE, SUITE310, APT#4  
City-St-Zip: ORLANDO, FL 32819 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: HABIB, IMTIAZ  
Address: 8849 LATREC AVE, SUITE310, APT#4  
City-St-Zip: ORLANDO, FL 32819 US

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

Title: VP ( ) Change (X) Addition  
Name: ALLOUI, CHAFIK  
Address: 12831 CRAGSIDE LANE  
City-St-Zip: WINDERMERE, FL 34786 US

Title: SECT ( ) Change (X) Addition  
Name: DELGADO, IVONNE  
Address: 4731 CASON COVE DR. APT#1317  
City-St-Zip: ORLANDO, FL 32811 FL

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

SIGNATURE: IMTIAZ HABIB

Electronic Signature of Signing Officer or Director

PRES

10/29/2008

Date