

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000061967

Entity Name: SHBIB'S, INC.

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1616 BARDMOOR HILL CIRCLE  
ORLANDO, FL 32835 US

**New Principal Place of Business:**

**Current Mailing Address:**

4630 S. KIRKMAN ROAD  
BOX 365  
ORLANDO, FL 32811 US

**New Mailing Address:**

FEI Number: 59-3198340

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHBIB, MUSTAFA  
4630 S KIRKMAN RD  
BOX 365  
ORLANDO, FL 32811 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: D  
Name: SHBIB, MUSTAFA  
Address: 4630 S KIRKMAN ROAD. BOX 365  
City-St-Zip: ORLANDO, FL 32811

Title: D  
Name: SHBIB, HISHAM  
Address: 4630 S KIRKMAN ROAD. BOX 365  
City-St-Zip: ORLANDO, FL 32811

I hereby 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 all other like empowered.

SIGNATURE: HISHAM SHBIB

V.P

04/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date