

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
95 JUN 27 PM 4: 22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000047167 (9)**

1. Corporation Name  
**GHALEB, INC.**

Principal Place of Business

2090 NW 75TH ST  
MIAMI FL 33147

Mailing Address

2090 NW 75TH ST  
MIAMI FL 33147

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified  
**06/23/1994**

3a. Date of Last Report

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

24. Zip

25. Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

30. Country

4. FEI Number  
**65-0499188**

Applied For  
Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

WHITNEY, WILFRID M ESQ  
201 W FLAGLER ST  
MIAMI FL 33130

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE: **DPST**  
NAME: **SHOUMAN, GHALEB L**  
STREET ADDRESS: **2090 NW 75TH ST**  
CITY - ST - ZIP: **MIAMI FL 33147**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE:   
NAME:   
STREET ADDRESS:   
CITY - ST - ZIP:

2.1 TITLE  Change  Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE:   
NAME:   
STREET ADDRESS:   
CITY - ST - ZIP:

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE:   
NAME:   
STREET ADDRESS:   
CITY - ST - ZIP:

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE:   
NAME:   
STREET ADDRESS:   
CITY - ST - ZIP:

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE:   
NAME:   
STREET ADDRESS:   
CITY - ST - ZIP:

6.1 TITLE  Change  Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE: *[Signature]*

(Signature, typed or printed name of signing officer or director)

Date

Daytime Phone #

1/19/95