
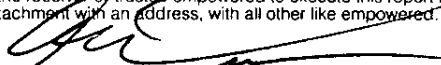


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90083 025 ***158.75

DOCUMENT # P95000032988 1. Entity Name LABIBI, INC.					
Principal Place of Business 9020 RANCHO DEL RIO DR., STE 124 NEW PORT RICHEY, FL 34655			Mailing Address 9020 RANCHO DEL RIO DR., STE 124 NEW PORT RICHEY, FL 34655		
2. Principal Place of Business - No P.O. Box # 9400 River Crossing Blvd.		3. Mailing Address 9400 River Crossing Blvd			
Suite, Apt. #, etc. Suite 102		Suite, Apt. #, etc. Suite 102			
City & State New Port Richey, FL		City & State New Port Richey, FL		4. FEI Number 59-3312487	
Zip 34655		Country Pasco		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DEEB, ALEX R 9020 RANCHO DEL RIO DR., STE 125 NEW PORT RICHEY, FL 34655			7. Name and Address of New Registered Agent Name Alex R. Deeb Street Address (P.O. Box Number is Not Acceptable) 9400 River Crossing Blvd. Suite 102 City New Port Richey, FL Zip 34655		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			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 DEEB, ALEX R 9020 RANCHO DEL RIO DR STE 125 NEW PORT RICHEY, FL 34655 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Alex R. Deeb 9400 River Crossing Blvd., Suite 102 New Port Richey, FL 34655 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DEEB, RICHARD G 9020 RANCHO DEL RIO DRIVE STE 121 NEW PORT RICHEY, FL 34655 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Richard G. Deeb 9400 River Crossing Blvd, Suite 102 New Port Richey, FL 34655 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEEB, THOMAS P 9020 RANCHO DEL RIOD RIVE STE 122 NEW PORT RICHEY, FL 34655 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Thomas P. Deeb 9400 River Crossing Blvd., Suite 102 New Port Richey, FL 34655 <input type="checkbox"/> Change <input checked="" 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: 			2/1/07 727-376-6831		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ALEX R. DEEB, PRESIDENT			Date Daytime Phone #		