

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 19, 2007 08:00 A
Secretary of State

DOCUMENT # P96000013800

1. Entity Name
KASSIS HOLDINGS, INC.



Principal Place of Business
**290 SW 12 AVE
DEERFIELD BEACH, FL 33442**

Mailing Address
**290 SW 12 AVE
DEERFIELD BEACH, FL 33442**



01232007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0649166

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BEAVER PROPERTIES, INC
290 SW 12 AVE
DEERFIELD BEACH, FL 33442**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature: typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SABGA, JOSEPH
STREET ADDRESS	290 SW 12 AVE
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442

TITLE	SD
NAME	SABGA, EMILE
STREET ADDRESS	290 SW 12 AVE
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442

TITLE	VD
NAME	SABGA, STEVEN PAUL
STREET ADDRESS	290 SW 12 AVE
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442

TITLE	T
NAME	SABGA, GEORGE
STREET ADDRESS	290 SW 12 AVE
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442

TITLE	VSD
NAME	SABGA, PETER
STREET ADDRESS	290 SW 12 AVE
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000670354
03/27/07-80108-018 150.00

**DO NOT WRITE
IN THIS SPACE**

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: Peter Sabga, Vice-Pres / Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/07
Date

954-425-0295
Daytime Phone #