FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000089392 (9)

KHOURI LABORATORIES, INC.

FILED Apr 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 328 CRANDON BOULEVARD STE. 227 328 CRANDON BOULEVARD STE. 227									
KEY BISCAYN		KEY BISCAYNE FL 33149		.,					
					DO NOT WRITE IN THIS SE	ACE			
					3. Date Incorporated or Qualified 10/17/1997				
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For		
2126					65-0810192	No'	t Applicable		
Suite, Apt. #, etc. Suite, Apt.		Suite, Apt. #, etc.	#, etc.		5. Certificate of Status Desired	\$8.75 A			
27					Of thicke of states besied	Fee Re	quired		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		May Be		
23		28	,		Trust Fund Contribution	Added to	o Fees		
Zip	Country	Zip	Country	′	8. This corporation owes or has paid the curre				
24	25	29	30				No		
	g, Name and Address of Curre	nt Registered Agent	81	Nome	10. Name and Address of New Registered Ag	jent			
	EL LA N, LILIANA V		81	Name					
308 ALCAZAR AVENUE STE. 302				Street A	Address (P.O. Box Number is Not Acceptable)				
CO	PRAL GABLES FL 33134								
			83						
			84	City		85 Zip C	Code		
			1	' '	<u>FL</u>				
11. Pursuant t	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	es, the abov	e-named	corporation submits this statement for the purpose of coration's board of directors. I hereby accept the appoi	hanging its	registered		
agent. Lar	m familiar with, and accept the oblig	ations of Section 607.0505, Flo	orida Statute	9 1116 CO/P S.	Solution's board of directors. Thereby accept the appear	in iciti as i	ogiatorea		
SIGNATURE									
	Stgnature, typed or printed name of registered ag			ent signature	required when reinstating) DATE				
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND I				
TITLE	n in the state of the state of	☐ DELETE	1.1 TITLE		L	Change	Addition		
NAME	KHOURI, SUSANA L		1.2 NAME	1					
STREET ADDRESS	328 CRANDON BLVD. STE.	22/	1.3 STREE	FADDRESS					
CITY-ST-ZIP	KEY BISCAYNE FL 33149		1.4 CITY - S	ST - ZIP		T			
TITLE	D	☐ DELETE	2.1 TITLE		L	Change	Addition		
NAME	KHOURI, ROGER	***	2.2 NAME						
STREET ADDRESS	328 CRANDON BLVD. STE.	227	2.3 STREE	ADDRESS	•				
CITY-ST-ZIP	KEY BISCAYNE FL 33149		2.4 CITY-	ST-ZIP		7	1872		
TITLE	4036 5.00.10 apt 2, minus pe 301	a 3. DELETE	3.1 TITLE		Constino Larier 4615W25th Ra, moon	Change	Addition		
NAME	8035 5.00.10	1 En ans	3.2 NAME	- 1	Charling toward				
STREET ADDRESS	art 2, miami		3.3 STREE	ADDRESS					
CITY-ST-ZIP	PR 301	13 <u> </u>	3.4. CITY -	ST-ZIP	FR 33149	7			
TITLE		☐ DELETE	4.1 TITLE		L	Change	Addition		
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE	ADDRESS					
CITY-ST-ZIP			4.4 CITY - 9	ST-ZIP	***	7.00	The second		
TITLE		☐ DELETE	5.1 TITLE		L	Change	Addition		
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	T ADDRESS					
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		7.00	11100		
TITLE		L_ DELETE	6.1 TITLE		l L	Change	Addition		
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	ADDRESS					
CITY-ST-ZIP			6.4 CITY-						
14. I hereby o	certify that the information supplied v	with this filing does not qualify fo all annual report is true and acc	or the exemp curate and th	otion state at may si∩	ed in Section 119.07(3)(i), Florida Statutes. I further cert nature shall have the same legal effect as if made unde	ty that the er oath: tha	information d I am an		
officer or of Block 12 of	director of the corporation or the eco or Block 13 if changed, or on an atta	eiver or trustee empowered to a men with an address.	execute his	recort as	nature shall have the same legal effect as if made under required by Chapter 607, Florida Statutes; and that my	name apr	ears in		