



## PROJECT DISCLOSURE STATEMENT

Parties having a 5% or more interest in the project that is the subject of this application.  
**THIS PAGE MUST BE FILLED OUT COMPLETELY AND NOTARIZED.** Do not indicate 'NONE' in the space provided.

STATE OF OHIO  
COUNTY OF FRANKLIN

APPLICATION # Z03-044

Being first duly cautioned and sworn (NAME) Khaled A. Farag  
of (COMPLETE ADDRESS) 733 Weston Park Dr. Powell Ohio 43065  
deposes and states that (he/she) is the APPLICANT, AGENT or DULY AUTHORIZED ATTORNEY FOR SAME and the following  
is a list of all persons, other partnerships, corporations or entities having a 5% or more interest in the project which is the  
subject of this application and their mailing addresses:

NAME \_\_\_\_\_

**COMPLETE MAILING ADDRESS**

Dr. Khaled A. Farag 733 Weston Park Drive Powell 43065

Dr. Sahar M. Hamzeh 733 Weston Park Drive Powell 43065

SIGNATURE OF AFFILIANT

Subscribed to me in my presence and before me this 8th day of June, in the year 2005

SIGNATURE OF NOTARY PUBLIC

My Commission Expires:

*This Project Disclosure Statement expires six months after date of notarization.*



**MATTHEW R. JOHNSON**  
NOTARY PUBLIC, STATE OF OHIO  
COMMISSION EXPIRES MARCH 23, 2004

*Notary Seal Here*