


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 24, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000008924  
1. Entity Name  
SAMMEE INVESTMENTS, INC.



Principal Place of Business      Mailing Address  
10560 NORTHWEST 18TH DRIVE      10560 NORTHWEST 18TH DRIVE  
PLANTATION, FL 33322      PLANTATION, FL 33322

**DO NOT WRITE IN THIS SPACE**



01182005    No Chg-P    CR2E034 (10/03)

4. FEI Number      Applied For  
11-3674087      Not Applicable

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

6. Name and Address of Current Registered Agent  
  
SPIEGEL & UTRERA, P.A.  
1840 SOUTHWEST 22 STREET 4TH FLOOR  
MIAMI, FL 33145

**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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

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

U00000190431  
01/24/05-80132-015 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP DEGEN, KURT C 10560 NORTHWEST 18TH DRIVE PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV SCHLEHUBER, TIMOTHY I 10560 NORTHWEST 18TH DRIVE PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST DEGEN, TRUDY 10560 NORTHWEST 18TH DRIVE PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Kurt C Degen*      Date: 1/19/05      Daytime Phone # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR