2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005831

Entity Name: SAMUEL, SON & CO., INC.

FILED Apr 16, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13939 NW 60TH AVE MIAMI LAKES, FL 33014 31

Current Mailing Address: New Mailing Address:

4334 WALDEN AVENUE LANCASTER, NY 14086 US

FEI Number: 22-3258593 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PR/D

Name: BASSETT, WAYNE K Address: 2360 DIXIE ROAD

City-St-Zip: MISSISSAUGA, ON L4Y 1Z7 CA

Title: VP

Name: PULEY, DONALD A Address: 2360 DIXIE ROAD

City-St-Zip: MISSISSAUGA, ON L4Y 1Z7 CA

Title: S/T

Name: ADORANTI, LARRY Address: 2360 DIXIE ROAD

City-St-Zip: MISSISSAUGA, ON L4Y 1Z7 CA

Title: ASST

 Name:
 ORLOWSKI, PAULA M

 Address:
 4334 WALDEN AVENUE

 City-St-Zip:
 LANCASTER, NY 14086 US

Title: DIR

Name: SAMUEL, MARK C Address: 2360 DIXIE ROAD

City-St-Zip: MISSISSAUGA, ON L4Y 1Z7 CA

Title: DIR

 Name:
 BROMLEY, ALAN E

 Address:
 4334 WALDEN AVENUE

 City-St-Zip:
 LANCASTER, NY 14086 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PAULA M. ORLOWSKI ASST 04/16/2012