

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90214 050 ***150.00

DOCUMENT # F02000003708					
1. Entity Name SAMPERS FINANCIAL, INC.					
Principal Place of Business 79 MIDLAND AVE. MONTCLAIR, NJ 07042			Mailing Address 779 7TH AVE. 49TH FLOOR NEW YORK, NY 10019		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 13-4072125	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO SAMPERS, ISIDORE HENRY JR 9115 WOODRIDGE RUN DRIVE TAMPA, FL 336472283		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO SAMPERS, ISIDORE HENRY JR. 79 Midland Ave Montclair, NJ 07042	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SAMPERS, JOHN H 11 LOWER NOTCH ROAD LITTLE FALLS, NJ 07424		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD SAMPERS, JOHN H. 79 Midland Ave Montclair, NJ 07042	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SAMPERS, ANN 79 Midland Ave Montclair, NJ 07042	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	U Goodman, Peter 79 Midland Ave Montclair, NJ 07042	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	U Liesen, Lori 500 W. Madison, Ste 2400 Chicago, IL 60661	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Zuccaro, Robert 787 Seventh Ave, 49th Fl. New York, NY 10019	
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: <u>John Liesen</u>			4-27-04 312-985-5700		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		