

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 22, 2004 8:00 am**  
**Secretary of State**

03-22-2004 90073 005 \*\*\*150.00

<b>DOCUMENT # F97000003223</b>					
<b>1. Entity Name</b> SAMSON HUNTER INTERNATIONAL TRADING, LTD. CO.					
<b>Principal Place of Business</b> 120 MURRAY ROAD WEST PALM BEACH, FL 33405 US			<b>Mailing Address</b> 120 MURRAY ROAD WEST PALM BEACH, FL 33405 US		
<b>2. Principal Place of Business</b> 713 Voyager Lane Suite, Apt. #, etc. North Palm Beach City & State FLORIDA Zip 33410 Country U.S.		<b>3. Mailing Address</b> Prosperity Harbour Suite, Apt. #, etc. 713 Voyager Lane City & State North Palm Beach, FL. Zip 33410 Country U.S.			
01062004 Chg-P CR2E034 (10/03)		<b>4. FEI Number</b> 65-0757502		Applied For <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
<b>6. Name and Address of Current Registered Agent</b> APPLEMAN, ROSS 120 MURRAY RD. WEST PALM BEACH, FL 33405			<b>7. Name and Address of New Registered Agent</b> Name <u>Ross Appleman</u> Street Address (P.O. Box Number is Not Acceptable) <u>713 Voyager Lane</u> City <u>North Palm Beach</u> FL Zip Code <u>33410</u>		
<b>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.</b> SIGNATURE <u>[Signature]</u> <u>Ross Appleman President</u> <u>3/18/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSC APPLEMAN, ROSS 120 MURRAY RD. W. PALM BEACH, FL 33405	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D President + Director Ross Appleman 713 Voyager Lane North Palm Beach FL. 33410	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Vice President + Director Joshua Appleman 713 Voyager Lane North Palm Beach, FL. 33410	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D Secretary + Director Zachary Appleman 713 Voyager Lane North Palm Beach FL. 33410	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D Treasurer + Director Cassandra Appleman 713 Voyager Lane North Palm Beach FL. 33410	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>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.</b>					
<b>SIGNATURE:</b> <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>3/18/04</u> <small>Date</small>		
<small>Daytime Phone #</small>					