

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandhya B. Methian
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L45289**

(0)

1. Corporation Name

E. C. SAMUEL, INC.



Principal Place of Business

**%E. C. SAMUEL
1735 LAKESHORE CIRCLE
FT. LAUDERDALE FL 33326**

Mailing Address

**%E. C. SAMUEL
1735 LAKESHORE CIRCLE
FT. LAUDERDALE FL 33326**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**SAMUEL, E. C.
1735 LAKESHORE CIRCLE
FT. LAUDERDALE FL 33326**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated/For Qualified
01/22/1990

3a. Date of Last Report
04/20/1995

4. FET Number
65-0167058

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

SIGNATURE

Signature of the person who is the registered agent

Signature of the person who is the registered agent

Signature of the person who is the registered agent

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
**PTD
SAMUEL, E. C.
1735 LAKESHORE CIRCLE
FT. LAUDERDALE FL**

TITLE ☐ DELETE

NAME
**VS
SAMUEL, MARIAMMA
1735 LAKESHORE CIRCLE
FT. LAUDERDALE FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE ☐ Change ☐ Addition

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE ☐ Change ☐ Addition

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE ☐ Change ☐ Addition

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE ☐ Change ☐ Addition

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE ☐ Change ☐ Addition

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE ☐ Change ☐ Addition

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE ☐ Change ☐ Addition

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

33. TITLE ☐ Change ☐ Addition

34. NAME

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/96 305-389-0499

CR2E034 (12/95)