

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000099305

FILED  
Sep 17, 2009  
Secretary of State

Entity Name: SAMUEL'S MAINTENANCE INC.

## Current Principal Place of Business:

3801 N UNIVERSITY DR, SUITE #101  
SUITE 311  
SUNRISE, FL 33351

## New Principal Place of Business:

3801 N UNIVERSITY DR, SUITE #101  
SUNRISE, FL 33351

## Current Mailing Address:

3801 N UNIVERSITY DR, SUITE #101  
SUITE 311  
SUNRISE, FL 33351

## New Mailing Address:

3801 N UNIVERSITY DR, SUITE #101  
SUNRISE, FL 33351

FEI Number: 65-1051244

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CRAMMER, EDWIN L CPA  
3801 N UNIVERSITY DR, SUITE #101  
SUITE 311  
SUNRISE, FL 33351 US

## Name and Address of New Registered Agent:

CRAMMER, EDWIN L CPA  
3801 N UNIVERSITY DR, SUITE #318  
SUNRISE, FL 33351 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:

09/17/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SAMUELS, WINSTON  
Address: 4301 NW 41ST TERR  
City-St-Zip: LAUDERDALE LAKES, FL 33319

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WINSTON SAMUELS

D

09/17/2009

Electronic Signature of Signing Officer or Director

Date