

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000087557

FILED  
Apr 22, 2002 8:00 AM  
Secretary of State

Entity Name: SAMSARA INTERNATIONAL, INC.

## Current Principal Place of Business:

1000 QUAYSIDE TERRACE, SUITE 509  
MIAMI, FL 33138

## New Principal Place of Business:

1000 QUAYSIDE TERRACE,  
SUITE 509  
MIAMI, FL 33138

## Current Mailing Address:

1000 QUAYSIDE TERRACE, SUITE 509  
MIAMI, FL 33138

## New Mailing Address:

1000 QUAYSIDE TERRACE,  
SUITE 509  
MIAMI, FL 33138

FEI Number: 01-0594485

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SALAZAR, LISETTE ESQ.  
240 CRANDON BLVD., SUITE 266  
KEY BISCAYNE, FL 33149 US

## Name and Address of New Registered Agent:

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WORTELBOER, JULIAN  
Address: 1000 QUAYSIDE TERRACE, SUITE 509  
City-St-Zip: MIAMI, FL 33138

Title: D ( ) Delete  
Name: WORTELBOER, GERARDO  
Address: 1000 QUAYSIDE TERRACE, SUITE 509  
City-St-Zip: MIAMI, FL 33138

Title: D ( ) Delete  
Name: GARCIA, GRACIELA  
Address: 1000 QUAYSIDE TERRACE, SUITE 509  
City-St-Zip: MIAMI, FL 33138

Title: D ( ) Delete  
Name: WORTELBOER, GRACIANA  
Address: 1000 QUAYSIDE TERRACE, SUITE 509  
City-St-Zip: MIAMI, FL 33138

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GRACIANA WORTELBOER

D

04/22/2002

Electronic Signature of Signing Officer or Director

Date