

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000068863

Entity Name: SAMY USA CORPORATION

FILED  
Jan 08, 2008  
Secretary of State

## Current Principal Place of Business:

451 E ALTAMONTE DR  
1483  
ALTAMONTE SPRINGS, FL 32701

## New Principal Place of Business:

309 NORTH PARK AVENUE  
WINTER PARK, FL 32789

## Current Mailing Address:

324 WILLOWBAY RIDGE STREET  
SANFORD, FL 32771

## New Mailing Address:

6935 BRESCIA WAY  
ORLANDO, FL 32819

FEI Number: 03-0462819

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRUMER, BARRY N  
5728 MAJOR BLVD.  
SUITE 545  
ORLANDO, FL 32819 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FERREIRA ZACHARIAS, MARIA D  
Address: 324 WILLOWBAY RIDGE STREET  
City-St-Zip: SANFORD, FL 32771

Title: SD ( ) Delete  
Name: FERREIRA ZACHARIAS, SAMIRA  
Address: 324 WILLOWBAY RIDGE STREET  
City-St-Zip: SANFORD, FL 32771

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: FERREIRA ZACHARIAS, MARIA D  
Address: 6935 BRESCIA WAY  
City-St-Zip: ORLANDO, FL 32819

Title: SD (X) Change ( ) Addition  
Name: FERREIRA ZACHARIAS, SAMIRA  
Address: 6935 BRESCIA WAY  
City-St-Zip: ORLANDO, FL 32819

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: SAMIRA F ZACHARIAS

PRES

01/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date