


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 29, 2004 8:00 am**  
**Secretary of State**

04-29-2004 90283 013 \*\*\*150.00

**DOCUMENT # P02000088651**

1. Entity Name  
**SAMIN INVESTMENT CORP.**



Principal Place of Business      Mailing Address

**1451 SW 1ST STREET**      **1451 SW 1ST STREET**  
**MIAMI, FL 33135**      **MIAMI, FL 33135**

**14011638**



04142004    No Chg-P    CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>57-1139643</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**LUIS-STEEGERS, CARMEN**  
**5445 COLLINS AVENUE 830**  
**MIAMI BEACH, FL 33140**

**DO NOT WRITE IN THIS SPACE**

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reconstituting)

DATE 4/15/04

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD LLERENA, SARA N 11975 SW 46 STREET MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD LUIS-STEEGERS, CARMEN 5445 COLLINS AVE. 830 MIAMI, FL 33140
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**DO NOT WRITE IN THIS SPACE**

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 info empowered.

SIGNATURE: Sara N Llerena President      Date: 4/15/04      Daytime Phone #: (305) 541-5890