FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Jun 27, 2003 8:00 am Secretary of State

	MENT # PO200 PELS F SAMUELS DO NOT WRITE	IN THIS SI	_И	06-27-2003 90052 040 ***	
6/50 . Suite, Apt.	Place of Business J 70 East STDTE RJ 70 East #, etc.	Suite, Apt. #. etc.		DO NOT WRITE IN THIS SPACE	
BLAC	FENTON, FL	City & State		1	lied For Applicable
3420.	3 Country 3 USA	Zip	Country	5. Certificate of Status Desired Security Fee Required	ional
KALANT.				7. Name and Address of Current Registered Agent	
			Name &c.	IEMN SAMUEL	
A Pharton	····DO NOT W	RITE			
	IN THIS SP	A PART OF THE PART OF THE ARREST AND ASSESSED.	Section Manual Age	P.O. Box Number is Not Acceptable)	
				T 103 ASOTA FL 2942	43
S The h	4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CA ARADINA	red agent, or both, in the State of Florida. I am familiar with, ar	,
SIGNATURE .	sorphire, when it is the instance of the insta	nuel nd the diapplicable. (NOTE	F. Pagistered Agam highliture required	4/25/03 DATE	
The second second		47.8.0.09204.831			
Maka Chéck	After May 1, Feo is \$550,00 Amended UBR is \$61:25 FPAYANIA IN FIGURE DAPARMENT OF	SISB		9. Election Campaign Financing \$5.00 Trust Fund Contribution. Added t	May Be Fees
Maka Check	Amended UBR is \$61.25	Sancaton Helph		70.00	Fees
Spinster of the Autor and the Control of the Contro	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	TITLE NAME STREET ADDRESS CHYST-7/P	Trust Fund Contribution. Added t	Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Amended UBR is \$61.25 Payable to Florida Department of	DIRECTORS	NAME STREET ADDRESS CITY STI - 21P T TITLE NAME: STREET ADDRESS	Trust Fund Contribution. Added t	Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE	Trust Fund Contribution. Added to	o Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE	Trust Fund Contribution. Added to	o Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	NAME STREET ADDRESS CITY ST-ZIPT TITLE NAME: STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP	Trust Fund Contribution. Added to the state of the stat	o Fees
10. TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	NAME STREET ADDRESS CITY ST ZIP TILE NAME STREET ADDRESS CITY ST ZIP TILE NAME STREET ADDRESS CITY ST ZIP TILE NAME STREET ADDRESS CITY ST ZIP	Trust Fund Contribution. Added to	o Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	NAME STREET ADDRESS CITY ST. ZIP THE NAME STREET ADDRESS CITY ST. ZIP THLE NAME STREET ADDRESS CITY ST. ZIP THLE NAME STREET ADDRESS CITY ST. ZIP	Trust Fund Contribution. Added to the state of the stat	o Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	NAME STREET ADDRESS DITY STUP TITLE	Trust Fund Contribution. Added to the state of the stat	o Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	NAME STREET ADDRESS DITY STUP TITLE	Trust Fund Contribution. Added to the state of the stat	o Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	NAME STREET ADDRESS DITY STUP TITLE	Trust Fund Contribution. Added to the state of the stat	o Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	NAME STREET ADDRESS DITY STUP TITLE	Trust Fund Contribution. Added to the state of the stat	o Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	NAME STREET ADDRESS CHY ST 2P TITLE NAME STREET ADDRESS CHY ST 2P	Trust Fund Contribution. Added to the state of the stat	o Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	NAME STREET ADDRESS DITY ST. 2IP TITLE NAME STREET ADDRESS DITY ST. 2IP	Trust Fund Contribution. Added to the state of the stat	o Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Amended UBP is \$61.25 FPAYANIA to FIbrilla Department of OFFICERS AND I	DIRECTORS	NAME STREET ADDRESS CHY ST 2P TITLE NAME STREET ADDRESS CHY ST 2P	Trust Fund Contribution. Added to the state of the stat	o Fees

12. Thereby 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 supply nental report is true and a courage 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/03 (941)782-5522 Date Date Phone : AHaChmedt

Samuels & Samuels Associates, Inc. 6150 State Road 70 Fact 1

June 23, 2003

Divisions of Corporation 409 E. Gaines St. Tallahassee, Fl 32399

Dear Sir/Madame:

My name is Bevelyn Samuel, President/CEO Samuels & Samuels Associates, Inc. On April 25, 2003, I submitted my Uniform Business Report along with Check # 1045 for \$150.00.

After balancing my checking account with Wachovia Bank (formerly First Union Bank), I noticed that Check #1045 had not been cashed. I immediately went online to www.sunbiz.org and noticed that my Annual Report for 2003 had not been posted. I called your office and spoke with a young lady that informed me that you had not received the check yet, nor the report. She informed me to resubmit another check with another UBR and submit it with this letter.

Please, find enclosed Check # 1127 for \$150.00, along with another UBR for Samuels & Samuels Associates, Inc.

Thanking you in advance for your immediate attention to this request.

Sincerely

President/CEO

Attachments: Check # 1127 and Copy of Check 1045

UBR, dated April 25, 2003