

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000029869

Entity Name: SAM BAYSHORE CORPORATION

FILED
Aug 23, 2005
Secretary of State

Current Principal Place of Business:

415 SW MAGNOLIA CORP.
1A
PT. ST. LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

415 SW MAGNOLIA ST
1A
PT. ST. LUCIE, FL 34986

New Mailing Address:

FEI Number: 55-0823475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUSSEIN, WISAM
415 SW MAGNOLIA ST
1A
PT. ST. LUCIE, FL 34986 US

Name and Address of New Registered Agent:

HUSEIN, WISAM
415 SW MAGNOLIA ST
1A
PT. ST. LUCIE, FL 34986 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: WISAM HUSEIN

08/23/2005

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: P () Delete
Name: HUSSEIN, WISAM
Address: 415 SW MAGNOLIA ST, 1A
City-St-Zip: PT. ST. LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HUSEIN, WISAM
Address: 415 SW MAGNOLIA ST, 1A
City-St-Zip: PT. ST. LUCIE, FL 34986

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: WISAM HUSEIN

P

08/23/2005

Electronic Signature of Signing Officer or Director

Date