2008 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not be indicated on this report or supplemental report is true and accurate and the corporation or the receiver or trustee empowered to execute this changed, or on an attachment with an address, with all other like empo.

Mar 06, 2008 8:00 am Secretary of State DOCUMENT # P05000004645 03-06-2008 90039 022 ***150.00 1. Entity Name SAMSAK, INC. Principal Place of Business Mailing Address 585 FAIRWAY DR. 585 FAIRWAY DR. MIAMI BEACH, FL 33141 MIAMI BEACH, FL 33141 No Chg-P CR2E034 (11/05) 02262008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 37-1502504 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SAKA, SAMUEL DO NOT WRITE 585 FAIRWAY DR. MIAMI BEACH, FL 33141 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ΡD TITLE SAKA, SAMUEL NAME STREET ADDRESS 585 FAIRWAY DR. CITY-ST-ZIP MIAMI BEACH, FL 33141 NAME STREET ADDRESS CITY-ST-ZIP TITLE DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information and that my signature shall have the same legal effect as if made under oath; that I am an officer or director his report as regained by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED