2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000096604

City-St-Zip:

VERO BEACH, FL 32962

Entity Name: SAMY MANUFACTURING INC.

FILED Jan 19, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1705 19TH PLACE SUITE E-2 4575 NORTH US HWY 1 VERO BEACH, FL 32960 SUITE 5N VERO BEACH, FL 32967 **Current Mailing Address: New Mailing Address:** 1705 19TH PLACE SUITE E-2 4575 NORTH USHWY 1 VERO BEACH, FL 32960 SUITE 5N VERO BEACH, FL 32967 FEI Number: 27-0126720 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TRUMP, GARY SCOTT, REDFIELD T 1705 19TH PLACE SUITE E-2 4575 NÓRTH U S HWY 1 VERO BEACH, FL 32960 SUITE 5N VERO BEACH, FL 32967 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: SCOTT T REDFIELD 01/19/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: P/D () Delete Title: () Change () Addition PATRICK-TRUMP, AMY Name: Name: 150 22ND AVE Address: Address: City-St-Zip: VERO BEACH, FL 32962 City-St-Zip: Title: VP/D Title: VP/D () Delete (X) Change () Addition Name: REDFIELD, SANDRA Name: REDFIELD, SANDRA T 531 10TH PLACE 531 10TH PLACE Address: Address: VERO BEACH, FL 32960 VERO BEACH, FL 32960 City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition T/D Title: T/D REDFIELD, SCOTT REDFIELD, SCOTT T Name: Name: 531 10TH PLACE 531 10TH PLACE Address: Address: City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: VERO BEACH, FL 32960 Title: S/D () Delete Title: () Change () Addition TRUMP, GARY Name: Name: Address: 150 19TH PLACE Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: SCOTT T REDFIELD T/D 01/19/2006