

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000129841

FILED  
Feb 12, 2009  
Secretary of State

Entity Name: SAMAKOW ENTERPRISES, INC.

## Current Principal Place of Business:

4781 N CONGRESS AVENUE  
BOYNTON BEACH, FL 33426

## New Principal Place of Business:

## Current Mailing Address:

4781 N CONGRESS AVENUE  
BOYNTON BEACH, FL 33426

## New Mailing Address:

FEI Number: 20-3499869

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAMAKOW, MAX  
4781 N CONGRESS AVENUE  
BOYNTON BEACH, FL 33426 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SAMAKOW, MAX  
Address: 4721 LUCERNE LKS BLVD # 74  
City-St-Zip: LAKE WORTH, FL 33467

Title: D ( ) Delete  
Name: SAMAKOW, SHIRLEY  
Address: 4721 LUCERNE LKS BLVD, # 74  
City-St-Zip: LAKE WORTH, FL 33467

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

SIGNATURE: MAX D. SAMAKOW

SEC

02/12/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date