## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000004405

Entity Name: SAMBA KOLA, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6800 NOVA DRIVE # 204 2360 NE 3RD AVENUE

DAVIE, FL 33317 POMPANO BEACH, FL 33060

Current Mailing Address: New Mailing Address:

6800 NOVA DRIVE # 204 2360 NE 3RD AVENUE

DAVIE, FL 33317 POMPANO BEACH, FL 33060

FEI Number: 20-1440891 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PIERRE-LOUIS, CLAUDE V-PRE
6800 NOVA DRIVE # 204

PIERRE-LOUIS, CLAUDE V-PRE
2360 NE 3RD AVENUE

DAVIE, FL 33317 US POMPANO BEACH, FL 33060 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: CLAUDE PIERRE-LOUIS 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

 Title:
 PRE
 ( ) Delete

 Name:
 PIERRE-LOUIS, ROSELYNE

 Address:
 6800 NOVA DRIVE #204

 City-St-Zip:
 DAVIE, FL 33317

 Title:
 V-PR
 ( ) Delete

 Name:
 PIERRE-LOUIS, CLAUDE

 Address:
 6800 NOVA DRIVE # 204

 City-St-Zip:
 DAVIE, FL 33317

Title: ( ) Delete

Name: Address: City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRE (X) Change () Addition
Name: PIERRE-LOUIS, ROSELYNE
Address: 2360 NE 3RD AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

Title: V-PR (X) Change ( ) Addition

 Name:
 PIERRE-LOUIS, CLAUDE

 Address:
 2360 NE 3RD AVENUE

 City-St-Zip:
 POMPANO BEACH, FL 33060

Title: VP ( ) Change (X) Addition

Name: OMAR-ALI, RICARDO Address: 211 NF 21 CT

City-St-Zip: POMPANO BEACH, FL 33060

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: CLAUDE PIERRE-LOUIS VP-T 04/30/2009