

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000096446

FILED  
Apr 05, 2007  
Secretary of State

Entity Name: SAMPA PROFESSIONAL SERVICES INC

## Current Principal Place of Business:

2101 SW 15TH VE  
APT. J-203  
BOYNTON BEACH, FL 33426

## New Principal Place of Business:

## Current Mailing Address:

2101 SW 15TH VE  
APT. J-203  
BOYNTON BEACH, FL 33426

## New Mailing Address:

FEI Number: 20-5257580

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FERREIRA, MARCELO  
2101 SW 15TH VE  
APT. J-203  
BOYNTON BEACH, FL 33426 US

## Name and Address of New Registered Agent:

FERREIRA, CATILENE  
2101 SW 15TH VE  
APT. J-203  
BOYNTON BEACH, FL 33426 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: CATILENE FERREIRA

04/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: FERREIRA, MARCELO  
Address: 2101 SW 15TH VE  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D ( ) Delete  
Name: FERREIRA, MARCELO  
Address: 2101 SW 15TH VE  
City-St-Zip: BOYNTON BEACH, FL 33426

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition  
Name: FERREIRA, CATILENE  
Address: 2101 SW 15TH VE  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D (X) Change ( ) Addition  
Name: FERREIRA, CATILENE  
Address: 2101 SW 15TH VE  
City-St-Zip: BOYNTON BEACH, FL 33426

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.

SIGNATURE: CATILENE FERREIRA

D

04/05/2007

Electronic Signature of Signing Officer or Director

Date