2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000133355

Entity Name: SAMA OPTIKA INC.

FILED Apr 30, 2008 Secretary of State

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

17100 COLLINS AVENUE 17070COLLINS AVENUE

103 255

SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160

Current Mailing Address: New Mailing Address:

17100 COLLINS AVENUE 17070 COLLINS AVENUE

SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160

FEI Number: 20-5744612 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:

AZERRAF, PROSPER
17100 COLLINS AVENUE
AZERRAF, PROSPER
17070COLLINS AVENUE
17070COLLINS AVENUE

SUITE 103 255

SÜNNY ISLES BEACH, FL 33160 US SÜNNY ISLES BEACH, FL 33160 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: PROSPER AZERRAF 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: AZERRAF, LISETTE Name: AZERRAF, LISETTE

Address: 17100 COLLINS AVENUE SUITE 112 Address: 17070 COLLINS AVENUE SUITE 255
City-St-Zip: SUNNY ISLES BEACH, FL 33160 City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VP () Delete Title: VP (X) Change () Addition

Name: FAZIO, LAURIE Name: FAZIO, LAURIE

Address: 17100 COLLINS AVENUE SUITE 112 Address: 17070COLLINS AVENUE SUITE 255
City-St-Zip: SUNNY ISLES BEACH ,, FL 33160 City-St-Zip: SUNNY ISLES BEACH ,, FL 33160

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 GATES, NATHALIE
 Name:
 GATES, NATHALIE

 Address:
 17100 COLLINS
 Address:
 17070 COLLINS SUITE 255

 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160
 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160

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: PROSPER AZERRAF P 04/30/2008