2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000055162

Entity Name: SAMOS CORNER, INC.

Title:

Title:

Name:

Name:

Address:

City-St-Zip:

() Delete

SAINT PETERSBURG, FL 33710

() Delete

HATZILIAS, ANNA

KARAKOUDAS, JITKA

5155 23 AV. N.

VS

FILED Jan 15, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
6801 GULFPORT BLVD S SOUTH PASADENA, FL 33707	6801 GULFPORT BLVD S SUITE 12 SOUTH PASADENA, FL 33707
Current Mailing Address:	New Mailing Address:
6801 GULFPORT BLVD S SOUTH PASADENA, FL 33707	6801 GULFPORT BLVD S SUITE 12 SOUTH PASADENA, FL 33707
FEI Number: 65-0816255 FEI Number Applied For () FEI Number	nber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
HATZILIAS, CHRIST 6801 GULFPORT BLVD S SOUTH PASADENA, FL 33707 US	HATZILIAS, CHRISTOS 6801 GULFPORT BLVD S SUITE 12 SOUTH PASADENA, FL 33707 US
The above named entity submits this statement for the purpose of in the State of Florida.	f changing its registered office or registered agent, or both,
SIGNATURE: CHRISTOS HATZILIAS	01/15/2009
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: P () Delete Name: CHRISTOS HATZILIAS, Address: 5155 23 AV. N. City-St-Zip: SAINT PETERSBURG, FL 33710	Title: () Change () Addition Name: Address: City-St-Zip:

Title:

Name:

Title:

Name:

Address:

City-St-Zip:

Address: 6514 FAIRVIEW DS. S
City-St-Zip: SAINT PETERSBURG, FL 33707
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: CHRISTOS HATZILIAS P 01/15/2009

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