# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 06, 2008 8:00 am**
**Secretary of State**
05-06-2008 90039 042 ***150.00

DOCUMENT # P97000097220

1. Entity Name
SAM & ROSIE, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 35230 US HIGHWAY 19 NORTH<br>PALM HARBOR, FL 34684 | 35230 US HIGHWAY 19 NORTH<br>PALM HARBOR, FL 34684 |

DO NOT WRITE IN THIS SPACE

01022008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3447854
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

THOMAS W. GAILOR
2849 PADLOCK DR
PALM HARBOR, FL 34684

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE 2/14/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2008 Fee will be $550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | P |
| NAME | DIANA, SAM |
| STREET ADDRESS | ~~2936 SHANNON CIRCLE~~ 1491-HILL VIEW LN |
| CITY-ST-ZIP | ~~PALM HARBOR, FL 34684~~ TARPON SPRINGS FL 34689 |
| TITLE | ~~S/T~~ |
| NAME | ~~DIANA, ROSE~~ |
| STREET ADDRESS | ~~2936 SHANNON CIRCLE~~ |
| CITY-ST-ZIP | ~~PALM HARBOR, FL 34684~~ |
| TITLE | |
| NAME | |
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| CITY-ST-ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Sam Diana SAM DIANA 2-19-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #