1999

1. Corporation Name



DOCUMENT # P98000011004

Katherine Harris

Secretary of State

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

FILED Apr 15, 1999 8:00 am Secretary of State

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SAMIYE	H, INC.				•			
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Principal Place	e of Business	Mailing Address			, (BE)(BE) ((B 1313) (B() 401)	13 EB131 AB311 BB15	15 16001 (6865 BAIS)	68 (11 8181 1881
9511 SW 7TH S	STREET	9511 SW 7TH STREET						
PEMBROKE PINES FL 33025 PEMBROKE PINES FL 33025				DO NOT V	VRITE IN THI	S SDACE		
					3. Date Incorporated or Quali		O OF ACE	
[02/02/1998 ·	icu		ĺ.
2 Dringing D	lace of Business	2a. Mailing Address	 .		4. FEI Number		belar	plied For
	lace of Busilless	26 Vicinity Address	·		, 41 / 21 / 10/10/00			t Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			· · · ·		\$8.75	
22		27			5. Certifcate of Status Desired	d	•	equired
City & State	e	City & State			6. Election Campaign Financi	ng	\$5.00	May Be
23		28			Trust Fund Contribution	'' ⁹ []		to Fees
Zip	Country	Zip	Country		8. This corporation owes the	current year Ir	ntangible	
24	25	29	0		Personal Property Tax.		☐Yes	X)No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of No	w Registered	d Agent	
			81	Name				
	SAR, MONA		82	Street Add	dress (P.O. Box Number is Not Acc	eptable)		
	SW 7TH STREET			•		<u> </u>		
PEM	Broke Pines FL 33025		83					}
			84	City			85 Zip	Code
						FI		
11 Durationt	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	the above	e-named cor	rporation submits this statement for	the purpose o	of changing its	registered
office or r	conintered exact or both in the State :			the comora:				aistereu :
l office or r	registered agent, or both, in the State of familiar with, and accept the obligation	of Florida. Such change was autitions of, Section 607.0505, Florid	la Statutes	the corpora	tion's board of directors, I hereby a	soope ino appe	omanon as re	gistered
office or r agent. I a	egistered agent, or both, in the State in familiar with, and accept the obligation	tions of, Section 607.0505, Florid	ia Statutes	the corpora			Situation as re	gistered
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.