

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90006 040 ***150.00

DOCUMENT # P98000038829

1. Entity Name

SAM SERVICES, INC.



Principal Place of Business

**PO BOX 86
LOXAHATCHEE FL 33470**

Mailing Address

**PO BOX 86
LOXAHATCHEE FL 33470**

2. Principal Place of Business

888 N. MILITARY TRL

Suite, Apt. #, etc.

3. Mailing Address

888 N. MILITARY TRL

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip

33415

Country

US

City & State

West Palm Beach, FL

Zip

33415

Country

US

4. FEI Number

65-0840960

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MORRIS, SHANAN
16030 E TRAFALGAR DRIVE
LOXAHATCHEE FL 33470**

7. Name and Address of New Registered Agent

Name

SHANAN MORRIS

Street Address (P.O. Box Number is Not Acceptable)

888 N. MILITARY TRL

City

West Palm Beach FL

Zip Code

33415

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2/24/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **MORRIS, SHANAN**
STREET ADDRESS **16030 E TRAFALGAR DRIVE**
CITY-ST-ZIP **LOXAHATCHEE FL 33470**

TITLE **DV** ☒ Delete
NAME **MORRIS, ANN**
STREET ADDRESS **16030 E TRAFALGAR DRIVE**
CITY-ST-ZIP **LOXAHATCHEE FL 33470**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/04

Date

561 662 1539

Daytime Phone #

Attachment
#P98000038829
440/4461

2/20/04

DIVISION OF CORPORATIONS
ANNUAL REPORT SECTION
PO BOX 6850
TALLAHASSEE, FL 32314

ENCLOSED PLEASE FIND MY ANNUAL REPORT WITH A CHECK IN THE
AMOUNT OF \$150.00. PLEASE NOTE THERE IS ONE DELETION AND A
CHANGE OF ADDRESS:

ANN MORRIS IS NO LONGER A DIRECTOR.
SHE HAS SIGNED BELOW TO ACKNOWLEDGE THIS CHANGE.
PLEASE TAKE HER OFF THE CORPORATE PAPERWORK FOR SAM SERVICES.

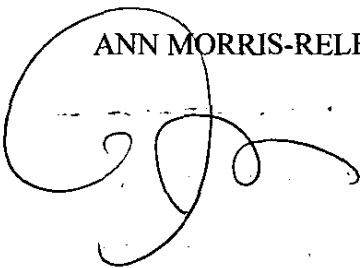
ALSO, PLEASE NOTE THE NEW ADDRESS BELOW.

THANK YOU.



SHANAN MORRIS, OWNER
SAM SERVICES, INC.
888 N MILITARY TRAIL
WEST PALM BEACH, FL 33415

ANN MORRIS-RELEASE:



NOTED FOR RELEASE
2/20/04

2/20/04