

# **2005 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P99000088920

Entity Name: SAMAY GROUP, INC.

**FILED**  
**Dec 20, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

6000 N. PALAFOX ST.  
PENSACOLA, FL 32503

**New Principal Place of Business:**

**Current Mailing Address:**

25 HIGHPOINT DR.  
PENSACOLA, FL 32561

**New Mailing Address:**

FEI Number: 59-3601667

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MATTHEWS, EDESEL F JR.  
308 SOUTH JEFFERSON STREET  
PENSACOLA, FL 32502 US

**Name and Address of New Registered Agent:**

MURPHY, ALISA R  
6000 N PALAFOX ST  
PENSACOLA, FL 32503 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: ALISA R MURPHY

12/20/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: SAMAY, BRIAN P  
Address: 25 HIGHPOINT DR.  
City-St-Zip: GULF BREEZE, FL 32561

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BRIAN P SAMAY

OWNE

12/20/2005

Electronic Signature of Signing Officer or Director

Date