

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S45421

FILED
Aug 26, 2009
Secretary of State

Entity Name: SAMARDAK REALTY CORP.

Current Principal Place of Business:

2002 OUAIL RUN DR.
DUNNELLON, FL 34432

New Principal Place of Business:

2002 OUAIL RUN DR.
DUNNELLON, FL 34432 US

Current Mailing Address:

PO BOX 864
DUNNELLON, FL 34430

New Mailing Address:

PO BOX 864
DUNNELLON, FL 34430 US

FEI Number: 59-3058665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORMAN, TERRY J.
1521 SW LEJEUNE RD
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: SAMARDAK, WILLIAM
Address: 1521 SW LEJEUNE RD
City-St-Zip: CORAL GABLES, FL

Title: AS () Delete
Name: FORMAN, TERRY J.
Address: 1521 SW LEJEUNE RD
City-St-Zip: CORAL GABLES, FL

Title: ST () Delete
Name: SAMARDAK, MODESTA
Address: 1521 SW LEJEUNE ROAD
City-St-Zip: CORAL GABLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: SAMARDAK, WILLIAM
Address: 1521 SW LEJEUNE RD
City-St-Zip: CORAL GABLES, FL 33134 US

Title: AS (X) Change () Addition
Name: FORMAN, TERRY J.
Address: 1521 SW LEJEUNE RD
City-St-Zip: CORAL GABLES, FL 33134 US

Title: ST (X) Change () Addition
Name: SAMARDAK, MODESTA
Address: 1521 SW LEJEUNE ROAD
City-St-Zip: CORAL GABLES, FL 33134 US

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: SAMARDAK, WILLIAM

DPS

08/26/2009

Electronic Signature of Signing Officer or Director

Date