FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S75512** **(1)**

1. Corporation Name

SAMAND CORP

Principal Place of Business

701 BRICKELL AVE
16TH FLOOR
MIAMI FL 33131

Mailing Address

701 BRICKELL AVE
16TH FLOOR
MIAMI FL 33131

3. Date Incorporated or Qualified: **08/23/1991**

3a. Date of Last Report: **02/09/1995**

4. FEI Number: **65-0289510**

☐ Applied For
☐ Not Applicable

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

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

8. This corporation is subject for intangible tax under s. 199.032 Florida Statutes ☐ Yes **XX** No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1928, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0505, Florida Statutes.

SIGNATURE _____ Date _____

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DPS
SUAREZ, MARGARITA
4685 WOODBURN RD
WV, BC, CANADA

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY-ST-ZIP ☐ Change ☐ Addition

13.5 TITLE
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY-ST-ZIP ☐ Change ☐ Addition

13.9 TITLE
13.10 NAME
13.11 STREET ADDRESS
13.12 CITY-ST-ZIP ☐ Change ☐ Addition

13.13 TITLE
13.14 NAME
13.15 STREET ADDRESS
13.16 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing 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 added, above.

SIGNATURE: R. F. Hudson, Jr.
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Robert F. Hudson, Jr. Attorney-in-Fact

3/28/96 **(305)789-8900**

CR2E034 (12/95)

0134661 CP