

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000082789

**FILED  
Jan 21, 2019  
Secretary of State  
9439196268CC**

**Entity Name:** SAMPA FIRE CORPORATION

**Current Principal Place of Business:**

409 NW 10TH TERRACE  
SUITE D-66  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

409 NW 10TH TERRACE  
SUITE D-66  
HALLANDALE BEACH, FL 33009

**FEI Number:** 81-4121505

**Certificate of Status Desired:** No

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

AMERICA EXPERT LLC  
409 NW 10TH TERRACE  
HALLANDALE BEACH, FL 33009 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            STAL BUENO, CRISTIAN  
Address        409 NW 10TH TERRACE - SUITE D-66  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            M. BUENO, MADALENA MARIA  
Address        409 NW 10TH TERRACE  
                  SUITE D-66  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            DE CAMPOS M. BUENO, DANIELA  
Address        409 NW 10TH TERRACE  
                  SUITE D-66  
City-State-Zip: HALLANDALE BEACH FL 33009

*I hereby 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 all other like empowered.*

**SIGNATURE:** STAL BUENO , CRISTIAN

**PRESIDENT**

**01/21/2019**

Electronic Signature of Signing Officer/Director Detail

Date