NONPRO CORPORA ANNUAL R	ATION REPORT	FLORIDA DEPARTMENT Sandra B. Morth Secretary of Sta DIVISION OF CORPO	OF STATE nam ate		
OCUME! orporation Name THE SCOT , INC.	NT # 741265 TTISH-AMERICAN SOCIET	ry of Central Florid	A		
cipal Place of Bu 3 ADELAIDE 81. 6 SMOKERISE BI BARY FL 32713	•	Mailing Address 273 ADELAIDE ST. 656 SMOKERISE BLVD. DEBARY FL 32713		Date Incorporated or Qualified 01/03/1978	3a. Date of Last Report 04/04/1995
3				4 FEI Number	Applied For
Principal Place	of Business	2a. Mailing Address 26 5 AM 6		59-2824066	Not Applicable \$8.75 Additional
/ 6 2 K Suite, Apt. #, etc	ENSINGTON PK	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
DAVAN	PURT FL Country USA.	Zip	Country	B. This corporation has liability for Florida Statutes	intangible tax under s. 199.032, Yes No
Zip 33 83		29 30	L	10. Name and Address of New Re	egistered Agent
273 ADEL Debary I		KENSINGTOW) PORT FL 5383	83 84 City	dress (P.O. Box Number is Not Accepta	FL 85 Zip Code
273 ADEL Debary I	AIDE ST. / G み A FL 32713 カタンダベ	KENSINGTOW) PORT FL 5383	83 84 City		FL 85 Zip Code
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14. I do hereby certify that the information supplied with this similar is voluntarily normalian annual report is true and accurate and that my signature shall have the same legal effect as if further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if further certify that it am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

| Description |