

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 831208

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: SCANDIA ENTERPRISES N.V.

**Current Principal Place of Business:**

C/O SHUTTS & BOWEN LLP  
201 S BISCAYNE BLVD, SUITE 1500 (JDB)  
MIAMI, FL 33131 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SHUTTS & BOWEN LLP  
201 S BISCAYNE BLVD, SUITE 1500 (JDB)  
MIAMI, FL 33131 US

**New Mailing Address:**

FEI Number: 59-1496834      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CORPORATION COMPANY OF MIAMI  
100 CHOPIN PLAZA 15TH FLOOR  
MIAMI, FL 33131 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: PD ( ) Delete  
Name: YOHOROS, MOISES,  
Address: % 201 S BISCAYNE 16TH FL  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: YOHOROS, DAVID M.,  
Address: % 201 S BISCAYNE 16TH FL  
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete  
Name: COVENANT MANAGERS NV,  
Address: 100 CHOPIN PLAZA 16TH FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete  
Name: YOHOROS, RICHARD M.,  
Address: % 201 S BISCAYNE 16TH FL  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: DAYAN, GAY ALEGRE Y  
Address: 100 CHOPIN PLAZA 16TH FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: VD ( ) Delete  
Name: HAMOUI DE YOHOROS, CAMELIA  
Address: 100 CHOPIN PLAZA 16TH FLOOR  
City-St-Zip: MIAMI, FL 33131

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

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

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

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

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

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

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

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: EYLEN COLLAZO

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

PM

01/21/2009

\_\_\_\_\_ Date