

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006734

Entity Name: S.C.C.U.S., INC.

FILED
Jul 14, 2006
Secretary of State

Current Principal Place of Business:

940 LINCOLN ROAD, SUITE 105
MIAMI BEACH, FL 33139

Current Mailing Address:

940 LINCOLN ROAD, SUITE 105
MIAMI BEACH, FL 33139

New Principal Place of Business:

407 LINCOLN ROAD
SUITE 500
MIAMI BEACH, FL 33139

New Mailing Address:

407 LINCOLN ROAD
SUITE 500
MIAMI BEACH, FL 33139

FEI Number: 72-1564968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCANDINAVIAN TRAVEL CENTER, INC.
940 LINCOLN ROAD, SUITE 105
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

SCANDINAVIAN TRAVEL CENTER, INC.
407 LINCOLN ROAD
SUITE 500
MIAMI BEACH, FL 33139 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: CHRISTINA DUKEMAN

07/14/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DYLOV, PER
Address: 940 LINCOLN ROAD, SUITE 105
City-St-Zip: MIAMI BEACH, FL 33139

Title: DS () Delete
Name: DYLOV, BODIL
Address: 940 LINCOLN ROAD, SUITE 105
City-St-Zip: MIAMI BEACH, FL 33139

Title: DS () Delete
Name: DUKEMAN, CHRISTINA
Address: 940 LINCOLN ROAD, SUITE 105
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DYLOV, PER
Address: 407 LINCOLN ROAD, SUITE 500
City-St-Zip: MIAMI BEACH, FL 33139

Title: DS (X) Change () Addition
Name: DYLOV, BODIL
Address: 407 LINCOLN ROAD, SUITE 500
City-St-Zip: MIAMI BEACH, FL 33139

Title: DS (X) Change () Addition
Name: DUKEMAN, CHRISTINA
Address: 407 LINCOLN ROAD, SUITE 500
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTINA DUKEMAN

DS

07/14/2006

Electronic Signature of Signing Officer or Director

Date