


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # G17254	
1. Entity Name SCRUPLES UNLIMITED, INC.	

Principal Place of Business 14320 IROQUOIS AVE. LARGO, FL 33774 US	Mailing Address 14320 IROQUOIS AVE. LARGO, FL 33774 US
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DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent EDELSTEIN, MIKKI 14320 IROQUOIS AVE LARGO, FL 33774	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EDELSTEIN, MIKKI 14320 IROQUOIS AVE LARGO, FL 33774
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD EDELSTEIN, ALVIN 14320 IROQUOIS AVE LARGO, FL 33774
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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04/29/04-89020-012 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>Mikki Edelstein</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> MIKKI EDELSTEIN	Date: <u>4/22/04</u>	Daytime Phone #: <u>727-596-2739</u>
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