

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J30608

Entity Name: VIDEO SCAN, INC.

FILED
Apr 19, 2007
Secretary of State

Current Principal Place of Business:

108 S. BAYVIEW BLVD.
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

PO BOX 307
OLDSMAR, FL 34677 US

New Mailing Address:

FEI Number: 59-2719038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEPION, JOSEPH A
12404 TROTTER CT.
TAMPA, FL 33626 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: V () Delete
Name: SCHRADER, CHRISTOPHE, R J.
Address: 203 APACHE STREET
City-St-Zip: TAVERNIER, FL 33070

Title: P () Delete
Name: SEPION, JOSEPH A.
Address: PO BOX 307
City-St-Zip: OLDSMAR, FL 346770307

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: KATHLEEN A. SCHRAD, ER
Address: 203 APACHE STREET
City-St-Zip: TAVERNIER, FL 33070 US

Title: P (X) Change () Addition
Name: SEPION, JOSEPH A.
Address: PO BOX 307
City-St-Zip: OLDSMAR, FL 346770307 US

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: JOSEPH A. SEPION

PRES

04/19/2007

Electronic Signature of Signing Officer or Director

Date