

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J88408

Entity Name: SCAN CENTER, INC.

FILED
Apr 23, 2008
Secretary of State

Current Principal Place of Business:

% BERIT PRIMDAL
4309 E. COLONIAL DR.
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

% BERIT PRIMDAL
4309 E. COLONIAL DR.
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 59-2850333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRIMDAL, BERIT
4309 E. COLONIAL DR.
ORLANDO, FL 32803 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: PRIMDAL, BERIT,
Address: 4764 INDIAN GAP DR.
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: PRIMDAL, AKSEL,
Address: 4764 INDIAN GAP DR.
City-St-Zip: ORLANDO, FL

Title: ST () Delete
Name: FISHERS, GHITA, MARI, A
Address: 4764 INDIAN GAP DR
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PRIMDAL, BERIT,
Address: 4764 INDIAN GAP DR.
City-St-Zip: ORLANDO, FL 32812

Title: D (X) Change () Addition
Name: PRIMDAL, AKSEL,
Address: 4764 INDIAN GAP DR.
City-St-Zip: ORLANDO, FL 32812

Title: ST (X) Change () Addition
Name: FISHERS, GHITA, MARI, A
Address: 5427 WINFREE DR.
City-St-Zip: ORLANDO, FL 32812

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: GHITA MARIA FISHERS

ST

04/23/2008

Electronic Signature of Signing Officer or Director

Date