2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000018747

Address:

City-St-Zip:

BRADENTON, FL 34210

Entity Name: SCRATCH IT AWAY, L.L.C.

Apr 30, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2919 SATSUMA DRIVE SARASOTA, FL 34239 **Current Mailing Address: New Mailing Address:** 2919 SATSUMA DRIVE SARASOTA, FL 34239 FEI Number: 59-3754640 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KENNEY, THERESA MARIE 10110 SÁN JOSE BLVD. JACKSONVILLE, FL 32257 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: Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGRM () Change () Addition () Delete CUPANEL, INC., Name: Name: 85 RIVERSIDE AVE, UNIT F-5 Address: Address: City-St-Zip: STAMFORD, CT 06905 City-St-Zip: Title: MGRM Title: () Delete () Change () Addition COSTE, FELIX Name: Name: Address: 2919 SATASUMA DRIVE Address: City-St-Zip: SARASOTA, FL 34239 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MAJORS, DANIEL Name: Name: 12943 TREE WAY COURT NORTH Address: Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: () Delete Title: MGRM Title: () Change () Addition Name: COSTE, JOHN Name: 2352 SAINT KENNEDY LANE Address: Address: City-St-Zip: BUFORD, GA 30518 City-St-Zip: MGRM Title: () Delete Title: () Change () Addition TWYMAN, WILLIAM Name: Name: 6003 COURTSIDE DRIVE

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: FELIX COSTE **MGRM** 04/30/2003