## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000065263

Entity Name: TARGET SCAN, LLC

Title:

Name:

Address:

City-St-Zip:

MGRM

THOMSON, MARK

() Delete

1150 GABLE DRIVE, UNIT 6

OAKVILLE, ON L6J 7R8 CA

FILED May 08, 2005 Secretary of State

() Change () Addition

**Current Principal Place of Business: New Principal Place of Business:** 5277 ISLA KEY BLVD. S. SUITE 421 ST. PETERSBURG, FL 33715 **New Mailing Address: Current Mailing Address:** 5277 ISLA KEY BLVD. S. SUITE 421 ST. PETERSBURG, FL 33715 FFI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDERSON, TONY A 5277 ISLA KÉY BLVD. S. SUITE 421 ST. PETERSBURG, FL 33715 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 ( ) Delete Title: () Change () Addition ANDERSON, TONY A Name: Name: Address: 5277 ISLA KEY BLVD. S., SUITE 421 Address: City-St-Zip: ST. PETERSBURG, FL 33715 US City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

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.

SIGNATURE: TONY ANDERSON MGRM 05/08/2005