

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED

Apr 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000022708

1. Entity Name
SCAN PRODUCTS INTERNATIONAL, INC.



Principal Place of Business
1355 NW 93RD COURT, A-104
MIAMI, FL 33172

Mailing Address
1355 NW 93RD COURT, A-104
MIAMI, FL 33172

DO NOT WRITE IN THIS SPACE

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01152004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0986487

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FREEMAN, BRUCE
17348 SW 36TH ST
MIRAMAR, FL 33029

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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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May-1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000116207
04/16/04-80055-004 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
FREEMAN, BRUCE
17348 SW 36TH ST
MIRAMAR, FL 33029

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 another file empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/9/04 (305) 5944294