2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P01000119346

1. Entity Name
MIAMI SCAN MACHINE CORP.

Principal Place of Business	Mailing Address
INTRACOASTAL YACHT CLUB #3	INTRACOASTAL YACHT CLUB #3
16900 N BAY RD STE 1114	16900 N BAY RD STE 1114
N MIAMI BCH, FL 33160	N MIAMI BCH, FL 33160

DO NOT WRITE IN THIS SPACE

01072004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
01-0547976	Not Applicable

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

6. Name and Address of Current Registered Agent

MCKENZIE, ALEX
16900 N BAY RD
N MIAMI BCH, FL 33160

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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

U00000080297
03/08/04-80102-020 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MCKENZIE, ALEX
STREET ADDRESS	16900 N BAY RD STE 1114
CITY-ST-ZIP	N MIAMI BCH, FL 33160
TITLE	V
NAME	MENDEZ, LIZZETTE
STREET ADDRESS	6545 INDIAN CREEK DRIVE SPT 308
CITY-ST-ZIP	MIAMI BEACH, FL 33141
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 all other like empowered.

SIGNATURE: _Alex Mackenzie_   2/15/2004   305-945-6355

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #