


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 27, 2008 8:00 am**  
**Secretary of State**

03-27-2008 90048 001 \*\*\*150.00  
 03-27-2008 90048 002 \*\*\*\*\*8.75

DOCUMENT # P01000119831  
 1. Entity Name  
 VENICE SCARLET MACAW INC.



Principal Place of Business      Mailing Address  
 225 W. VENICE AVENUE      225 W. VENICE AVENUE  
 VENICE, FL 34285              VENICE, FL 34285

**DO NOT WRITE IN THIS SPACE**

66005074



03092008    No Chg-P    CR2E034 (11/05)

4. FEI Number 36-4509995	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MATSKO, PEGGY P  
~~322 RID TERRA~~      199 Grand Oak Circle  
 VENICE, FL 34285      Venice, FL 34292

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reissuing)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MATSKO, PEGGY P
STREET ADDRESS	199 GRAND OAK CIRCLE
CITY-ST-ZIP	VENICE, FL 34292
TITLE	D
NAME	MATSKO, PAUL R
STREET ADDRESS	199 GRAND OAK CIRCLE
CITY-ST-ZIP	VENICE, FL 34292
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 exemptions contained 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 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: Peggy P. Matsko      Peggy P. Matsko      3/8/08      941-485-8110

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