2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000004204

Entity Name: SCRAPLIFE, INC.

FILED Mar 24, 2004 Secretary of State

6612 MIMOSA CT. 6802 SW 81 STREET MIAMI, FL 33143 MIAMI, FL 33143

Current Mailing Address: New Mailing Address:

6612 MIMOSA CT. 6802 SW 81 STREET MIAMI, FL 33143 MIAMI, FL 33143

FEI Number: 04-3734672 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CESPEDES-LUJAN, RENEE M
6612 MIMOSA CT.
6802 SW 81 STREET
MIAMI, FL 33143
MIAMI, FL 33143

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: 03/24/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title: OVAKIT, MELANIE OVAKIT, MELANIE Name: Name: 6612 MIMOSA CT. 6802 SW 81 STREET Address: Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: MIAMI, FL 33143

 Title:
 VD
 () Delete
 Title:
 VD
 (X) Change () Addition

 Name:
 CESPEDES-LUJAN, RENEE M
 Name:
 CESPEDES-LUJAN, RENEE M

 Address:
 6612 MIMOSA CT.
 Address:
 6802 SW 81 STREET

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 6612 MIMOSA CT.
 Address:
 6802 SW 81 STREE

 City-St-Zip:
 MIAMI, FL 33143
 City-St-Zip:
 MIAMI, FL 33143

Title: () Delete Title: ST () Change (X) Addition

 Name:
 Name:
 PICANS, YOLANDA A

 Address:
 Address:
 6802 SW 81 STREET

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33143

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: YOLANDA A PICANS ST 03/24/2004