## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000055255

Entity Name: MAD DOG SCOOTERS, INC.

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1265 S. MILITARY TRAIL
WEST PALM BEACH, FL 33415
4400 10TH AVE NORTH
LAKE WORTH, FL 33461

Current Mailing Address: New Mailing Address:

1265 S. MILITARY TRAIL
WEST PALM BEACH, FL 33415
4400 10TH AVE NORTH
LAKE WORTH, FL 33461

FEI Number: 11-3689778 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NAPOLI, NICOLE

1265 S. MILITARY TRAIL

WEST PALM BEACH, FL 33415 US

FUSCO, CHRISTINA
4400 10TH AVE NORTH
LAKE WORTH, FL 33461 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: CHRISTINA FUSCO 04/27/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 FUSCO, MICHAEL
 Name:
 FUSCO, MICHAEL

 Address:
 1265 S. MILITARY TRAIL
 Address:
 4400 10TH AVE NORTH

 City-St-Zip:
 WEST PALM BEACH, FL 33415
 City-St-Zip:
 LAKE WORTH, FL 33461

Title: VPD ( ) Delete Title: VP (X) Change ( ) Addition Name: NAPOLI, SALVATORE Name: NAPOLI, SALVATORE

Name:NAPOLI, SALVATOREName:NAPOLI, SALVATOREAddress:1265 S. MILITARY TRAILAddress:4400 10TH AVE NORTHCity-St-Zip:WEST PALM BEACH, FL 33415City-St-Zip:LAKE WORTH, FL 33461

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

 Name:
 NAPOLI, STEPHEN A
 Name:

 Address:
 602 PINE WAY
 Address:

 City-St-Zip:
 W. PALM BEACH, FL 33415
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MICHAEL FUSCO P 04/27/2007