

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000087955

Entity Name: SCALET CO, INC.

FILED  
May 05, 2006  
Secretary of State

## Current Principal Place of Business:

455 DOUGLAS ROAD  
2155-1  
ALTAMONTE SPRINGS, FL 32714

## New Principal Place of Business:

1745 TRAVERTINE TERRACE  
SANFORD, FL 32771

## Current Mailing Address:

455 DOUGLAS ROAD  
2155-1  
ALTAMONTE SPRINGS, FL 32714

## New Mailing Address:

1745 TRAVERTINE TERRACE  
SANFORD, FL 32771

FEI Number: 20-1207883

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCALET TA, JOAN L  
934 MARKET PROMENADE AVENUE  
LAKE MARY, FL 32746 US

## Name and Address of New Registered Agent:

SCALET TA, JOAN L  
1745 TRAVERTINE TERRACE  
SANFORD, FL 32771 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:

05/05/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: SCALET TA, JOAN L  
Address: 934 MARKET PROMENADE AVENUE  
City-St-Zip: LAKE MARY, FL 32746

Title: T (X) Delete  
Name: WILSON, LERNARD  
Address: 6820 NAWADAHA BLVD  
City-St-Zip: ORLANDO, FL 32818 53

Title: P ( ) Delete  
Name: SCALET TA, MICHAEL E  
Address: 934 MARKET PROMENADE AVENUE  
City-St-Zip: LAKE MARY, FL 32746

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition  
Name: SCALET TA, JOAN L  
Address: 1745 TRAVERTINE TERRACE  
City-St-Zip: SANFORD, FL 32771

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P,T (X) Change ( ) Addition  
Name: SCALET TA, MICHAEL E  
Address: 1745 TRAVERTINE TERRACE  
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the 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 E SCALET TA

P

05/05/2006

Electronic Signature of Signing Officer or Director

Date