


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 24, 2007 8:00 am
Secretary of State

07-24-2007 90040 046 ***150.00

DOCUMENT # P06000040546	
1. Entity Name SCAN AGAIN, INC.	

Principal Place of Business 1101 NICHOLSON ROAD, UNIT 3 NEWMARKER, ONTARIO L9Y 3C9, OC	Mailing Address 1101 NICHOLSON ROAD, UNIT 3 NEWMARKER, ONTARIO L9Y 3C9, OC
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2. Principal Place of Business - No P.O. Box # 1101 Nicholson Rd. Unit 3	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Newmarket, ONTARIO	City & State
Zip L9Y 9C3	Country CANADA

07172007 Chg-P CR2E034 (12/06)

4. FEI Number 20-4542028	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
WALK, GARY 515 N. FLAGLER DRIVE, 18TH FLOOR WEST PALM BEACH, FL 33401	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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	DATE

FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUCK, JAMES L	NAME	
STREET ADDRESS	2078 VENDOME AVENUE	STREET ADDRESS	
CITY - ST - ZIP	MONTREAL, QUEBEC, CANADA,	CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRACKEN, TIM	NAME	
STREET ADDRESS	154 BLUESKI GEORGE CR, COLLINGWOOD	STREET ADDRESS	
CITY - ST - ZIP	ONTARIO, CANADA, L9Y 3Z2,	CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAHAM, TOM	NAME	
STREET ADDRESS	2087 SOUTHVIEW AVENUE INNISFIL,	STREET ADDRESS	
CITY - ST - ZIP	ONTARIO, CANADA, L9S 1H4,	CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	

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.	
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SIGNATURE: 	Sandra Woodcock	July 17, 2007	905-953-8373 x105
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #

ATTACHMENT
40126829
P06000040546
Florida Department of State
Division of Corporations
P.O. Box 8700
Tallahassee, Florida
32314

July 18, 2007

Scan Again Inc.
1101 Nicholson Road, Unit #3
Newmarket, ON
L3Y 9C3

Please find the enclosed 2007 Annual Report with our registration fee of \$150.00. It is my understanding that the extra \$400.00 charge will be waived as we did not receive the request to report as the address was incorrect. We did confirm with our lawyer that the address on the paperwork we filed upon original registration was correct.

Please contact me if you need to.

A handwritten signature in black ink, appearing to read 'Sandra Woodcock', with a long horizontal flourish extending to the right.

Sandra Woodcock, CMA
Controller