

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000076879

Entity Name: SCRATCH GUARD, INC.

FILED
Jul 24, 2007
Secretary of State

Current Principal Place of Business:

4339 W WHITEWATER AVENUE
WESTON, FL 33332 US

New Principal Place of Business:

3907 VISTA GROVE LANE
WESTON, FL 33332 US

Current Mailing Address:

4339 W WHITEWATER AVENUE
WESTON, FL 33332 US

New Mailing Address:

3907 VISTA GROVE LANE
WESTON, FL 33332 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTEGA, MAITE M
4339 W WHITEWATER AVENUE
WESTON, FL 33332 US

Name and Address of New Registered Agent:

ORTEGA, MAITE M
3907 VISTA GROVE LANE
WESTON, FL 33332 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:

07/24/2007

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: PD () Delete
Name: ORTEGA, OVI
Address: 4339 W WHITEWATER AVENUE
City-St-Zip: WESTON, FL 33332 US

Title: VSTD () Delete
Name: ORTEGA, MAITE M
Address: 4339 W WHITEWATER AVENUE
City-St-Zip: WESTON, FL 33332 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ORTEGA, OVI
Address: 3907 VISTA GROVE LANE
City-St-Zip: WESTON, FL 33332 US

Title: VSTD (X) Change () Addition
Name: ORTEGA, MAITE M
Address: 3907 VISTA GROVE LANE
City-St-Zip: WESTON, FL 33332 US

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: OVI ORTEGA

OWNR

07/24/2007

Electronic Signature of Signing Officer or Director

Date