

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000025301

Entity Name: SCROLLING ADZ, INC.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

20283 STATE ROAD 7
SUITE 400
BOCA RATON, FL 33498

Current Mailing Address:

21858 MARIGOT DRIVE
BOCA RATON, FL 33428

New Principal Place of Business:

7777 WEST GLADES ROAD
SUITE 100
BOCA RATON, FL 33434

New Mailing Address:

7777 WEST GLADES ROAD
SUITE 100
BOCA RATON, FL 33434

FEI Number: 26-0212121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OKTAY, SERHAD
21858 MARIGOT DRIVE
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

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:

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: P () Delete
Name: OKTAY, SERHAD
Address: 21858 MARIGOT DRIVE
City-St-Zip: BOCA RATON, FL 33428

Title: VP () Delete
Name: OKTAY, SERHAD
Address: 21858 MARIGOT DRIVE
City-St-Zip: BOCA RATON, FL 33428

Title: S () Delete
Name: OKAY, SERHAD
Address: 21858 MARIGOT DRIVE
City-St-Zip: BOCA RATON, FL 33428

Title: T () Delete
Name: OKTAY, SERHAD
Address: 21858 MARIGOT DRIVE
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: OKTAY, SERHAD
Address: 21858 MARIGOT DRIVE
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: SERHAD OKTAY

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date