

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000025642

Entity Name: SCRAPLIFE DESIGNS, INC.

FILED
Jan 09, 2009
Secretary of State

Current Principal Place of Business:

12200 VISTA LANE
PINECREST, FL 33156

New Principal Place of Business:

Current Mailing Address:

12200 VISTA LANE
PINECREST, FL 33156

New Mailing Address:

FEI Number: 20-8420012

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEVER, MELANIE O DP
10194 SW 202 TERRACE
MIAMI, FL 33189 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WEVER, MELANIE O
Address: 10194 SOUTHWEST 202ND PLACE
City-St-Zip: MIAMI, FL 33189

Title: DS () Delete
Name: LUJAN, RENEE
Address: 12200 VISTA LANE
City-St-Zip: PINECREST, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: WEVER, MELANIE O
Address: 10194 SW 202 TERRACE
City-St-Zip: MIAMI, FL 33189

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: MELANIE O. WEVER

DP

01/09/2009

Electronic Signature of Signing Officer or Director

Date