

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000037004

Entity Name: SCANDINAVIAN COVERS, INC.

FILED  
Apr 09, 2008  
Secretary of State

## Current Principal Place of Business:

350 ORANGE LANE STE 1000  
CASSELBERRY, FL 32707

## New Principal Place of Business:

350 ORANGE LANE  
SUITE # 1000  
CASSELBERRY, FL 32707

## Current Mailing Address:

350 ORANGE LANE STE 1000  
CASSELBERRY, FL 32707

## New Mailing Address:

FEI Number: 59-3179218

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FAZECAS, MIHAI  
350 ORANGE LANE STE 1000  
CASSELBERRY, FL 32707 US

## Name and Address of New Registered Agent:

FAZECAS, MIHAI  
350 ORANGE LANE  
SUITE # 1000  
CASSELBERRY, FL 32707 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: MIHAI FAZECAS

04/09/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: FAZECAS, JULIANA  
Address: 350 ORANGE LANE, SUITE # 1000  
City-St-Zip: CASSELBERRY, FL 32707

Title: P ( ) Delete  
Name: FAZECAS, MIHAI  
Address: 350 ORANGE LANE, SUITE # 1000  
City-St-Zip: CASSELBERRY, FL 32707

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FAZECAS, MIHAI  
Address: 350 ORANGE LANE, SUITE # 1000  
City-St-Zip: CASSELBERRY, FL 32707

Title: VP (X) Change ( ) Addition  
Name: FAZECAS, JULIANA  
Address: 350 ORANGE LANE, SUITE # 1000  
City-St-Zip: CASSELBERRY, FL 32707

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: MIHAI FAZECAS

P

04/09/2008

Electronic Signature of Signing Officer or Director

Date