

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2003 8:00 am
Secretary of State

03-26-2003 90182 033 ***150.00

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1. Entity Name

SCAN DESIGN OF FT. LAUDERDALE, INC.



Principal Place of Business
1153 BENNETT DRIVE
LONGWOOD FL 32750-6352
US

Mailing Address
1153 BENNETT DRIVE
LONGWOOD FL 32750-6352
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-3310224

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KNUDSEN, K. P.
460 WEBSTER AVE
WINTER PARK FL 32789

Name **K.P. Knudsen**
Street Address (P.O. Box Number is Not Acceptable)
1153 Bennett Dr.
City **Longwood** FL **32750**

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, the registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSD** ☐ Delete
NAME **KNUDSEN, KNUD P**
STREET ADDRESS **460 WEBSTER AVENUE**
CITY-ST-ZIP **WINTER PARK FL**

TITLE **D** ☐ Change ☒ Addition
NAME **Ulrik Aarhus**
STREET ADDRESS **1153 Bennett Dr.**
CITY-ST-ZIP **Longwood, FL 32750**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Peter Knudsen**
STREET ADDRESS **1153 Bennett Dr.**
CITY-ST-ZIP **Longwood, FL 32750**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PSD** ☒ Change ☐ Addition
NAME **Knudsen, Knud P**
STREET ADDRESS **1153 Bennett Dr.**
CITY-ST-ZIP **Longwood, FL 32750**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **K.P. Knudsen**

Date

Daytime Phone #

CR2E034 (10/02)