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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P95000006059	(6)
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SCUTT USA, INC.

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Mailing Address

2699 STIRLING ROAD. #A-302 FORT LAUDERDALE FL 33024

2699 STIRLING ROAD. #A-302 FORT LAUDERDALE FL 33024



					3. Date incorporated or Qualified 01/18/1995	3a. Date	of Last	
2. Principal Pla 241		2a. Mailing Address 26 Z+15 5	1172 is	of PD	4. FEI Number	110	Ţ	Applied For
Suite, Apt. a		Suite, Apt. #, etc.	4		5. Certificate of Status Desired			Not Applicable 5 Additional Required
City & State	LANDERDALE	City & State	O ,	FL	6. Election Campaign Financing Trust Fund Contribution		\$5.0	00 May Be led to Fees
^{7(p} 33	312 country シスト	29 ZIP 35312	Countr 30	グト	8. This corporation has liability for it Florida Statutes Yes		under s	s 199.032,
	9. Name and Address of Current R	egistered Agent			10. Name and Address of New R	egistered A	gent	
A			81	Name				
SCUTT, JASON Q			82	Street Addre	ss (P.O. Box Number is Not Acceptable	le;		
	TRLING ROAD, #A-302		-					
LOKI D	AUDERDALE FL 33024		83	'i				
			84	City			8 5 Z	7ip Code
11. Pursuant to	o the provisions of Sections 607,0502 an	d 607 1508. Florida Stat dos	the above	panied series	tion out with this state	<u> </u>	ĻĻ.	
SIGNATURE	ed agent, or both, in the State of Florida. In, and accept the obligations of, Section Signature types or printed name of registered agent and	tile tappleable (NOTE	E Flegistered Age	nt signature requirerty	Men excel ting	DATE		<u>.</u>
12.	OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFFI			
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STHEE! ADDRESS	2699 STIRLING ROAD, #A-302		1.2 NAME					
CITY-ST-ZIP	FORT LAUDERDALE FL 33024			1 ADDRESS				
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certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Scott

Daylore Phone I

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