

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000020974

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: SCANWELL LOGISTICS (MIA) INC.

## Current Principal Place of Business:

7425 NW 48TH STREET  
MIAMI, FL 33166

## New Principal Place of Business:

## Current Mailing Address:

C/O RAY BECKERMAN, P.C.  
108-18 QUEENS BLVD, 4TH FL.  
FOREST HILLS, NY 11375 US

## New Mailing Address:

FEI Number: 65-0651131      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: PD ( ) Delete  
Name: LIN, GINO  
Address: 1995 LINDEN BLVD.  
City-St-Zip: ELMONT, NY 110034024

Title: SDC ( ) Delete  
Name: HASSAN, ADAM  
Address: 1995 LINDEN BLVD.  
City-St-Zip: ELMONT, NY 110034024

Title: CPA ( ) Delete  
Name: MILLER, JULIAN J  
Address: 180 RIVERSIDE BLVD. - SUITE 40D  
City-St-Zip: NEW YORK, NY 10069

Title: GC ( ) Delete  
Name: RAY, BECKERMAN COUNSEL  
Address: 108-18 QUEENS BLVD 4 FL  
City-St-Zip: FOREST HILLS, NY 11375 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SDC (X) Change ( ) Addition  
Name: HASSAN, ADAM  
Address: 1995 LINDEN BLVD.  
City-St-Zip: ELMONT, NY 110034024 US

Title: CPA (X) Change ( ) Addition  
Name: MILLER, JULIAN J  
Address: 180 RIVERSIDE BLVD. - SUITE 40D  
City-St-Zip: NEW YORK, NY 10069 US

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: JULIAN J MILLER

CPA

03/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date