


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 12, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P98000071341</b>	
1. Entity Name <b>SCOUT PROPERTIES, INC.</b>	

Principal Place of Business <b>520 BRICKELL KEY DR. #A-BH23 MIAMI, FL 33131</b>	Mailing Address <b>520 BRICKELL KEY DR. #A-BH23 MIAMI, FL 33131</b>
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DO NOT WRITE IN THIS SPACE



01102007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0860250</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**LEGAL ASSETS, INC.  
1401 BRICKELL AVENUE  
SUITE 700  
MIAMI, FL 33131**

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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 registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U00000585693 01/16/07-80023-011 158.75
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SACHER, ANGELA A 520 BRIKELL KEY DR., #A-BH23 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SACHER, BARTON S 520 BRICKELL KEY DR., #A-BH23 MIAMI, FL 33131
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** *Angela A. Sacher* **PRESIDENT**  
**ANGELA A. SACHER** 1/10/07 (305) 372-2769  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #