

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000083956

FILED
Apr 27, 2006
Secretary of State

Entity Name: SCRATCH & DENT WORLD, INC.

Current Principal Place of Business:

397 N BABCOCK ST
MELBOURNE, FL 32935 US

New Principal Place of Business:

Current Mailing Address:

397 N BABCOCK ST
MELBOURNE, FL 32935 US

New Mailing Address:

FEI Number: 59-3541907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALMON, MARK S
397 N BABCOCK ST
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

COLEMAN, CHRISTOPHER J ESQUIRE
397 N BABCOCK ST
MELBOURNE, FL 32935 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: CHRISTOPHER J. COLEMAN

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SALMON, MARK STUART
Address: 10 STOCKTON DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: PAK, SAM
Address: 321 SANDHURST DRIVE
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK STUART SALMON

D

04/27/2006

Electronic Signature of Signing Officer or Director

Date