## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment

## Jan 22, 2008 8:00 am Secretary of State DOCUMENT # V63687 1. Entity Name 01-22-2008 90076 018 \*\*\*158.75 S.C.R. FOODS, INC. Mailing Address Principal Place of Business 18911 S TAMIAMI TRAIL 18911 S TAMIAMI TRAIL #6 FORT MYERS, FL 33908 FORT MYERS, FL 33908 No Chg-P CR2E034 (11/05) 01122008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 65-0363326 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE CIANCIMINO, GIUSEPPE A 18911 S TAMIAMI TRAIL #6 FORT MYERS, FL 33908 IN THIS SPACE 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE CIANCIMINO, GIUSEPPE A 1444 TANGELWOOD PKWY STREET ADDRESS CITY-ST-ZIP FT MYERS, FL 33919 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-St-7P TITLE NAME STREET ADORESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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

**FILED**