

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001025

FILED  
Apr 24, 2012  
Secretary of State

Entity Name: PROJECT SKYLIGHT, INC.

**Current Principal Place of Business:**

102 NE 2ND STREET  
# 316  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

102 NE 2ND STREET  
# 316  
BOCA RATON, FL 33432

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOSES, JUDY  
102 NE 2ND STREET  
# 316  
BOCA RATON, FL 33432 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WEISSMAN, ARTHUR  
Address: 102 NE 2ND STREET # 316  
City-St-Zip: BOCA RATON, FL 33432

Title: VPD  
Name: BROWN, ED  
Address: 102 NE 2ND STREET # 316  
City-St-Zip: BOCA RATON, FL 33432

Title: TSD  
Name: BREJT, ABRAHAM  
Address: 102 NE 2ND STREET # 316  
City-St-Zip: BOCA RATON, FL 33432

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ABRAHAM BREJT

SEC

04/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date