

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000000114

Entity Name: SKYHIGH REVENUE, INC.

FILED
Jan 22, 2004
Secretary of State

Current Principal Place of Business:

ATTN: DEMAREE SEXSON, 7232 LAUREL STREET
BROOKSVILLE, FL 34613

New Principal Place of Business:

Current Mailing Address:

ATTN: DEMAREE SEXSON, 7232 LAUREL STREET
BROOKSVILLE, FL 34613

New Mailing Address:

FEI Number: 04-3589031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

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: PSD () Delete
Name: CONSILVIO, PATTI L
Address: 1431 CALLE REDONDA
City-St-Zip: ESCONDIDO, CA 92026

Title: D () Delete
Name: LAWSON, CINDY L
Address: 26065 WESTRIDGE AVENUE
City-St-Zip: SUN CITY, CA 92586

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 Section 119.07(3)(i), 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: PATTI CONSILVIO

PRES

01/22/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date