2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000040964

Address:

5751 NW 151 ST

City-St-Zip: MIAMI LAKES, FL 33014

Entity Name: SKYLAKE FOODS CORPORATION

FILED Apr 27, 2007 Secretary of State

Entity Name: Skylake FOODS CORPORATION					
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
5751 NW 1 MIAMI LAKI	51 ST ES, FL 33014	US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
PO BOX 43 SOUTH MIA	3-2720 AMI, FL 33243	US			
FEI Number:	20-0825851	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
CABRERA, EMILIO JR. 5751 NW 151 STREET MIAMI LAKES, FL 33014 US			5751 NW 151 STREET	EC MANAGEMENT CORP 5751 NW 151 STREET MIAMI LAKES, FL 33014 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: HILDA CABRERA				04/27/2007	
Electronic Signature of Registered Agent			t	Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () DO CABRERA, EMILIO 5751 NW 151 ST MIAMI LAKES, FL	O JR.	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	ST () Do CABRERA, HILDA 5751 NW 151 ST MIAMI LAKES, FL	I	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name:	VP () DO		Title: (Name:) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: HILDA CABRERA ST 04/27/2007