

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000054403		
1. Entity Name SKYMATT ASSOCIATES, INC.		
Principal Place of Business 912 N 76 AVE HOLLYWOOD, FL 33024	Mailing Address 912 N 76 AVE HOLLYWOOD, FL 33024	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent RUIZ, JUAN P 912 N 76 AVE HOLLYWOOD, FL 33024		DO NOT WRITE 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 <u><i>Daisy Ruiz</i></u> (NOTE: Registered Agent signature required when reinstalling) Signature, typed or printed name of registered agent and title if applicable.		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		05/08/06-20036-015 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RUIZ, JUAN P 912 N 76 AVE HOLLYWOOD, FL 33024	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RUIZ, DAISY R 912 N 76 AVE HOLLYWOOD, FL 33024	
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12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u><i>Daisy Ruiz</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<u><i>April 21, 2006</i></u> 7863550252 Date Daytime Phone #



03212006 No Chg-P CR2E034 (11/05)

4. FEI Number **30-0239703** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required