

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V66660

FILED
Mar 27, 2012
Secretary of State

Entity Name: SKYWAY '92 CORP.

Current Principal Place of Business:

C/O PETER LAWRENCE COMMERCIAL RE, INC
4710 EISENHOWER BLVD, C-1
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

C/O PETER LAWRENCE COMMERCIAL RE, INC
4710 EISENHOWER BLVD, C-1
TAMPA, FL 33634

New Mailing Address:

FEI Number: 59-3143953 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETER LAWRENCE COMMERCIAL R. E., INC
4710 EISENHOWER BLVD
SUITE C-1
TAMPA, FL 33634 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: DC
Name: ABRAMS, ALLAN
Address: 4710 EISENHOWER BLVD. STE C-1
City-St-Zip: TAMPA, FL 33634

Title: DT
Name: ABRAMS, ELAINE
Address: 4710 EISENHOWER STE C-1
City-St-Zip: TAMPA, FL 33634

Title: S
Name: ABRAMS, ROBERTA
Address: 4710 EISENHOWER STE C-1
City-St-Zip: TAMPA, FL 33634

Title: P
Name: HOOVER, KRISTOPHER M
Address: 4710 EISENHOWER BLVD STE C-1
City-St-Zip: TAMPA, FL 33634

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

SIGNATURE: KRISTOPHER M. HOOVER

P

03/27/2012

Electronic Signature of Signing Officer or Director

_____ Date