

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000002311

**Entity Name:** 2004 SKYLINE, INC.

**Current Principal Place of Business:**

3301 NE 183 STREET  
THE PENINSULA II APT 1705  
AVENTURA, FL 33160

**Current Mailing Address:**

1390 BRICKELL AVENUE  
SUITE 200  
MIAMI, FL 33131

**FEI Number:** 01-0833629

**Certificate of Status Desired:** No

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

CASTILLO B., ALVARO  
1390 BRICKELL AVE STE 200  
MIAMI, FL 33131 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name GOMEZ, LUIS G  
Address 1549 BREAK WATER TERRACE  
City-State-Zip: HOLLYWOOD FL 33019

Title D  
Name PEREZ, DORIS G  
Address 1549 BREAK WATER TERRACE  
City-State-Zip: HOLLYWOOD FL 33019

*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:** LUIS G GOMEZ

D

03/20/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date