

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000027965

**Entity Name:** SKYWAY EXPRESS, INC.

**Current Principal Place of Business:**

3235 W HARBOR VIEW AVENUE  
TAMPA, FL 33611

**Current Mailing Address:**

3235 W. HARBOR VIEW AVE.  
TAMPA, FL 33611 US

**FEI Number:** 59-3566329

**Certificate of Status Desired:** No

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

CASCELLA, ROBERT F  
3235 W. HARBOR VIEW AVE  
TAMPA, FL 33611 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 CASCELLA, ROBERT F  
Address 3235 W HARBOR VIEW AVE  
City-State-Zip: TAMPA FL 33611

Title D  
Name CASCELLA, ANN MARIE  
Address 3235 W HARBOR VIEW AVE  
City-State-Zip: TAMPA FL 33611

*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: ROBERT CASCELLA**

**PRESIDENT**

**03/30/2023**

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

\_\_\_\_\_  
Date