

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002678

Entity Name: SKYCROSS, INC.

FILED
Jan 27, 2011
Secretary of State

Current Principal Place of Business:

7341 OFFICE PARK PLACE
SUITE 102
VIERA, FL 32940

New Principal Place of Business:

Current Mailing Address:

7341 OFFICE PARK PLACE
SUITE 102
VIERA, FL 32940

New Mailing Address:

FEI Number: 59-3706438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHEINBLUM, MARK D ESQ.
450 SOUTH ORANGE AVENUE
SUITE 800
ORLANDO, FL 32801 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: DBM
Name: CHANG, ANTHONY
Address: 555 CALIFORNIA STREET, 3RD FLOOR
City-St-Zip: SAN FRANCISCO, CA 94104

Title: DBM
Name: CHOU, SCOTT
Address: 350 MARINE PARKWAY, SUITE 200
City-St-Zip: REDWOOD SHORES, CA 94065

Title: SEC
Name: MO, CURTIS
Address: 2000 UNIVERSITY AVENUE
City-St-Zip: EAST PALO ALTO, CA 96303

Title: CD
Name: NASKAR, BEN
Address: 7341 OFFICE PARK PLACE, SUITE 102
City-St-Zip: VIERA, FL 32940

Title: DBM
Name: MARTIN, DON
Address: 4601 S. ATLANTIC AVE. SUITE 605
City-St-Zip: PONCE INLET, FL 32832

Title: DBM
Name: KIM, ALBERT
Address: 333 MIDDLEFIELD RD SUITE 110
City-St-Zip: MENLO PARK, CA 94025

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: TIMOTHY CAPP

VP

01/27/2011

Electronic Signature of Signing Officer or Director

Date