

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000003024

Entity Name: BLUE SKY HIGH, INC.

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

515 WASHINGTON AVENUE  
CARLSTADT, NJ 07072

**New Principal Place of Business:**

**Current Mailing Address:**

515 WASHINGTON AVENUE  
CARLSTADT, NJ 07072

**New Mailing Address:**

FEI Number: 41-2098892

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BALSHI, ANNIE  
117 NW MADISON COURT  
PORT ST LUCIE, FL 34986 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CVCD  
Name: BALSHI, ANNE  
Address: 117 NW MADISON COURT  
City-St-Zip: PORT ST LUCIE, FL 34986

Title: PVPS  
Name: BALSHI, ANNE  
Address: 117 NW MADISON COURT  
City-St-Zip: PORT ST LUCIE, FL 34986

Title: T  
Name: BALSHI, ANNE  
Address: 117 NW MADISON COURT  
City-St-Zip: PORT ST LUCIE, FL 34986

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: ANNIE BALSHI

PRES

03/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date