

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004116

Entity Name: SKY TV INC.

FILED  
Feb 26, 2009  
Secretary of State

## Current Principal Place of Business:

106 NE 44TH AVENUE  
OCALA, FL 34470

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 830338  
OCALA, FL 34483

## New Mailing Address:

P. O. BOX 830338  
OCALA, FL 34483

FEI Number: 68-0604933

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PINZON, CARMENZA  
106 NE 44TH AVENUE  
OCALA, FL 34470 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: CP ( ) Delete  
Name: PINZON, CARMENZA  
Address: 106 NE 44TH AVENUE  
City-St-Zip: OCALA, FL 34470

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change ( ) Addition  
Name: PINZON, CARMENZA  
Address: 106 NE 44TH AVENUE  
City-St-Zip: OCALA, FL 34470

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CARMENZA PINZON

CPD

02/26/2009

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

\_\_\_\_\_  
Date