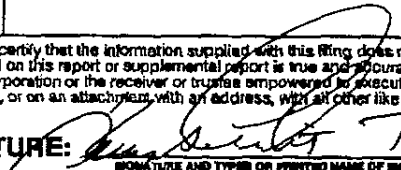


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2004 08:00 AM
Secretary of State

DOCUMENT # F98000004999			
1. Entity Name SKYBORNE PARTS, INC.			
Principal Place of Business 3965 SW SAN CLEMENTE CT PALM CITY, FL 34990		Mailing Address 3965 SW SAN CLEMENTE CT PALM CITY, FL 34990	
DO NOT WRITE IN THIS SPACE			
5. Certificate of Status Desired ☐		Applied For Not Applicable	
6. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent WEISBROT, TERRY 3965 SW SAN CLEMENTE CT PALM CITY, FL 34990			
DO NOT WRITE IN THIS SPACE			
9. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____		U000000034176 02/05/04 20073-000 150.00 DATE	
Signature, typed or printed name of registered agent and title (if applicable).		(NOTE: Registered Agent signature required when reinstating)	
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$650.00		9. Election Campaign Financing Trust Fund Contribution, ☐ \$5.00 May Be Added to Fee	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P WEISBROT, TERRY 3965 SW SAN CLEMENTE CT PALM CITY, FL 34990		
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TITLE NAME STREET ADDRESS CITY- ST- ZIP			
DO NOT WRITE IN THIS SPACE			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		TERRY A. WEISBROT 1/31/04 772-2154411	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	