

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G93052

1. Entity Name

SKYLINE ELECTRIC INC.

FILED
Mar 31, 2000 8:00 am
Secretary of State

03-31-2000 90050 031 ***150.00

Principal Place of Business

715-1 WHITNEY AVENUE
LANTANA FL 33462
US

Mailing Address

PO BOX 210907
WEST PALM BEACH FL 33421-0907

2. Principal Place of Business

533 BARNETT LANE

3. Mailing Address

Suite, Apt. #, etc.

23

City & State

LAKE WORTH, FL

City & State

Zip

33461

Country

Zip

Country

4. FEI Number

59-2390994

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SALERNO, SALVATORE
715-1 WHITNEY AVE
LANTANA FL 33462

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

533 BARNETT LANE, # 23

City

LAKE WORTH,

FL

Zip Code 33461

8. 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

Sal Sal

Signature, typed or printed name of registered agent and title if applicable

(SALVATORE SALERNO)

(NOTE: Registered Agent signature required when reinstating)

3/28/00

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME PTD
STREET ADDRESS SALERNO, SALVATORE
CITY-ST-ZIP 715-1 WHITNEY AVE
LANTANA FL 33462

TITLE ☐ Delete
NAME VSD
STREET ADDRESS SALERNO, MARIA
CITY-ST-ZIP 715-1 WHITNEY AVE
LANTANA FL 33462

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 533 BARNETT LANE, # 23
CITY-ST-ZIP LAKE WORTH, FL 33461

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 533 BARNETT LANE, #23
CITY-ST-ZIP LAKE WORTH, FL 33461

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sal Sal
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/00
Date

(561-798-4974)
Daytime Phone #