

H 59002

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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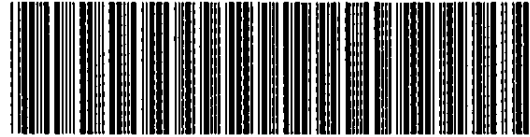
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sky Mart Sales Corp.
Name of Corporation

DOCUMENT NUMBER: H59002

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Juan G. Robbin

Name of Contact Person

Sky Mart Sales Corp.

Firm/Company

P.O. Box 522007

Address

Miami, FL 33152

City/State and Zip Code

Juan@skymartsales.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan G. Robbin at (305) 420-0114
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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