2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# L03000007724

Entity Name: SKYGROUP INVESTMENTS, LLC

Current Principal Place of Business:

7600 DR. PHILLIPS BOULEVARD
SUITE 58
ORLANDO, FL 32836

New Principal Place of Business:

7600 DR. PHILLIPS BOULEVARD
SUITE 58
ORLANDO, FL 32819

Current Mailing Address:

7600 DR. PHILLIPS BOULEVARD
SUITE 58
ORLANDO, FL 32836

New Mailing Address:

7600 DR. PHILLIPS BOULEVARD
SUITE 58
ORLANDO, FL 32819

FEI Number: 20-0251521 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KITCHEN, WILLIAM J
8815 SOUTHERN BREEZE DRIVE
ORLANDO, FL 32836 US

Name and Address of New Registered Agent:

ALAN, METNI
7600 DR. PHILLIPS BOULEVARD
SUITE 58
ORLANDO, FL 32819 US

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: ALAN METNI 04/30/2004
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition
Name: METNI, ALAN
Address: 7600 DR PHILLIPS BLVD, SUITE 58
City-St-Zip: ORLANDO, FL 32819

Title: MGRM ( ) Change (X) Addition
Name: WILLIAM, KITCHEN
Address: 7600 DR PHILLIPS BLVD, SUITE 58
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ALAN METNI MGRM 04/30/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date