

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M18773

FILED
Jul 10, 2006
Secretary of State

Entity Name: DEPENDABLE SKY CAP SERVICE, INC.

Current Principal Place of Business:

470 EXECUTIVE CENTER DRIVE
3E
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 078645
WEST PALM BEACH, FL 33407

New Mailing Address:

420 CLEMATIS STREET
WEST PALM BEACH, FL 33401

FEI Number: 59-2637822

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTNER, NARDA E
420 CLEMATIS STREET
2ND FLOOR
WEST PALM BEACH, FL 33401 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: ST () Delete
Name: FRANKS, MICHAEL J
Address: 391 W. 23RD STREET
City-St-Zip: RIVIERA BEACH, FL 33404

Title: P () Delete
Name: TAYLOR, WILLIAM F
Address: 470 EXECUTIVE CTR. DR., #3E
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM TAYLOR

P

07/10/2006

Electronic Signature of Signing Officer or Director

Date