2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 21, 2008
Secretary of State

DOCUMENT# N06000012533

Entity Name: SKAL INTERNATIONAL MIAMI, INC.

Current Principal Place of Business:

9240 SW 66TH STREET
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

9240 SW 66TH STREET
MIAMI, FL 33173

New Mailing Address:

FEI Number: 23-7173324 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MEYER, LEWIS EST
9240 SW 66TH STREET
MIAMI, FL 33173 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

OFFICERS AND DIRECTORS:

Title:	PRES	( ) Delete
Name:	ANTELO, RAMON PRES	
Address:	50 ALHAMBRA PLAZA	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:	VP	( ) Delete
Name:	MEYER, NINA VP	
Address:	2151 LEJEUNE RD. - SUITE 300	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:	SECT	( ) Delete
Name:	GONZALEZ, ALFREDO SECTY	
Address:	100 EAST BROWARD BOULEVARD	
City-St-Zip:	FT. LAUDERDALE, FL 33301	
Title:	TREA	( ) Delete
Name:	PERKS, CHRISTOPHER C	
Address:	P.O.BOX 570627	
City-St-Zip:	MIAMI, FL 33257	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	EST	( ) Change (X) Addition
Name:	MEYER, LEWIS	
Address:	9240 SW 66TH STREET	
City-St-Zip:	MIAMI, FL 33173	

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAMON ANTELO PRES 04/21/2008
Electronic Signature of Signing Officer or Director Date