## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000029990

Entity Name: SKYBAR OF TAMPA, INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2019 WEST PLATT STREET 303 SOUTH MELVILLE AVENUE

TAMPA, FL 33606 TAMPA, FL 33606

Current Mailing Address: New Mailing Address:

2019 W PLATT ST 303 SOUTH MELVILLE AVENUE

#106-388 TAMPA, FL 33606 TAMPA, FL 33606

FEI Number: 20-0943066 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ORTIZ, TOMMY
2019 WEST PLATT STREET
TAMPA, FL 33606 US
ORTIZ, TOMMY
303 SOUTH MELVILLE AVENUE
TAMPA, FL 33606 US
TAMPA, FL 33606 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.

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

SIGNATURE:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

04/27/2009

Title: MGRM ( ) Delete Title: V (X) Change ( ) Addition

 Name:
 ORTIZ, THOMAS
 Name:
 ORTIZ, THOMAS

 Address:
 2019 WEST PLATT STREET
 Address:
 303 SOUTH MELVILLE AVENUE

City-St-Zip: TAMPA, FL 33606 City-St-Zip: TAMPA, FL 33606

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Title: MGRM ( ) Delete Title: P (X) Change ( ) Addition

Name: SCOTT, CHRISTOPHER Name: SCOTT, CHRISTOPHER
Address: 2019 WEST PLATT STREET Address: 303 SOUTH MELVILLE AVENUE

City-St-Zip: TAMPA, FL 33606 City-St-Zip: TAMPA, FL 33606

Title: MGRM ( ) Delete Title: ST (X) Change ( ) Addition

Name: HANNOUCHE, PETER A
Address: 2019 WEST PLATT STREET
Name: HANNOUCHE, PETER A
Address: 303 SOUTH MELVILLE AVENUE

City-St-Zip: TAMPA, FL 33606 City-St-Zip: TAMPA, FL 33606

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS ORTIZ V 04/27/2009