

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000006379

Entity Name: SKYLIGHT CONCEPTS, INC.

FILED
May 31, 2007
Secretary of State

Current Principal Place of Business:

1203 NW 65TH PLACE
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

1203 NW 65TH PLACE
FT. LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 38-3641110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODRICH, MYRON K
1203 NW 65TH PLACE
FT. LAUDERDALE, FL 33309 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: P () Delete
Name: GOODRICH, MYRON K
Address: 10411 NW 18TH DRIVE
City-St-Zip: PLANTATION, FL 33322

Title: VP () Delete
Name: PALUCCI, ROBERT J
Address: 5533 NW 107TH AVE.
City-St-Zip: CORAL SPRINGS, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CEO (X) Change () Addition
Name: PALUCCI, ROBERT J
Address: 5533 NW 107TH AVE.
City-St-Zip: CORAL SPRINGS, FL 33076

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: ROBERT J PALUCCI

CEO

05/31/2007

Electronic Signature of Signing Officer or Director

Date