FILED
May 14, 2003 8:00 am
Secretary of State
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04-25-2003 90245 025 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000066794

1. Entity Name
SUKY, INC.

55040431

[redacted]

Principal Place of Business	Mailing Address
1560 COLONIAL BLVD. #232 FT. MYERS, FL 33907	1560 COLONIAL BLVD. #232 FT. MYERS, FL 33907

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
1661 Estero blvd	1661 Estero blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Ft. Myers beach, FL.	Ft. Myers beach, FL.
City & State	City & State
Zip 33931 Country USA	Zip 33931 Country USA

4. FEI Number 043691772 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PALTOO, YUDELKA A MS
1560 COLONIAL BLVD.
#232
FT. MYERS, FL 33907

7. Name and Address of New Registered Agent

Name PALTOO Yudelka A. MS
Street Address (P.O. Box Number is Not Acceptable) 6361 Aragon Way.
Ft. Myers #202
City FL Zip Code 33912

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] 4/23/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE NOW!!! FEE IS $150.00
After May 1, 2003, Fee Will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V PALTOO, MELISSA C 1560 COLONIAL BLVD. FT. MYERS, FL 33907 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V PALTOO, Melissa C 6361 Aragon way #202 Ft myers, FL 33912 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 4/23/03 239-463-6262
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #