2004 FOR PROFIT CORPORATION

FILED Mar 10, 2004 8:00 am Secretary of State 03-10-2004 90023 032 ***150.00

ANNUAL REPURI	
DOCUMENT # P02000075948	
1. Entity Name	
SKAR CORP.	

Principal Plac	ce of Business	Mailing Address	-							
1475 S. BEL CLEARWATEI	.CHER ROAD R, FL 33764	1475 S. BELCHER ROAD CLEARWATER, FL 3376								
					1 	DELID 11911 DW111 DB116 661	 	IILIO (AKIO OLOG		
2. Principal F	Place of Business Magnolia Drive	3. Mailing Address	olia Do	ive						
Suite, Apt.		Suite, Apt. #, etc.	<u> (12-1)-</u>		03072004	Chg-P	CR2E) 34 (10/0)3)	
City & Stat		City & State						- ,		
	rwater, FL	Clearwat	er, FL	_	4. FEI Number 02-064				Applied For	
3376	SH Country	33764	Country		5. Certificate	of Status Desired		\$8.75 Fee Requ	Additional uired	
	6. Name and Address of Current Re	egistered Agent			7. Name and	Address of New F	Registered	Agent -		
SKVD SH	INTRINIDED &		Name							
SKAR, SUKHWINDER S 1475 S. BELCHER ROAD CLEARWATER, FL 33764			Street A	Street Address (P.O. Box Number is Not Acceptable)						
			City		·		FL	Zip C	ode	
	e named entity submits this statement for t tions of registered agent.	he purpose of changing its r	egistered office o	registere	d agent, or bol	th, in the State of Fl	orida. Lam	familiar w	ith, and ac	
SIGNATURE										
	Signature, typed or printed name of registered agent and	i title il applicable. (NOTE:	Registered Agent signat	ure required w	vhen reinstating)		DATE		9.4	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	9. Election Campaig Trust Fund Contri)0 May Be d to Fees		- • - •			
10.	OFFICERS AND D	IRECTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND	DIRECTO	ORS IN 11	
TITLE	D	☐ Delete	TITLE					Chang	ge 🔲 Ad	
NAME CTURET ADDRESS	SKAR, SUKWINDER S		NAME STREET ADDRESS	104	-C M - a	nalis De	·			
STREET ADDRESS CITY-ST-ZIP	1475 S. BELCHER ROAD GLEARWATER, FL 33784		CITY-ST-ZIP	Cla	acuat	noliz Drer, FL 3	3764	L		
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NAME	SKAR, ULLA R S	23 50000	NAME			. ~		****	,	
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CITY-ST-ZIP	GLEARWATER, FL 33764		CITY-ST-ZIP	Cle	armat	er, FL	3376	-4		
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STREET ADDRESS			STREET ADDRESS							
CITY-ST-ZIP			CITY-ST-ZIP			· .				

SIGNATURE: RAWN SKA

^{12.} Thereby 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 informati 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 direct 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 changed, or on an attachment with an address, with all other like empowered.