

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000075948

1. Entity Name
SKAR CORP.



FILED

07 APR -4 PM 3:39

CLERK OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
451 CENTRAL PARK DRIVE
LARGO, FL 33771

Mailing Address
451 CENTRAL PARK DRIVE
LARGO, FL 33771

2. Principal Place of Business - No P.O. Box #
2138 SW 9th RD
Suite, Apt. #, etc.

3. Mailing Address
2138 SW 9th RD
Suite, Apt. #, etc.



REINSTATEMENT 06-07

City & State
Ocala FL
Zip
34474
Country
US

City & State
Ocala FL
Zip
34474
Country
US

4. FEI Number
02-0643088
Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SKAR, SUKHWINDER S
451 CENTRAL PARK DRIVE
LARGO, FL 33771

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
2138 SW 9th RD
City
Ocala FL Zip Code
34474

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]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

✓ 4/2/07

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SKAR, SUKHWINDER S
451 CENTRAL PARK DRIVE
LARGO, FL 33771 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SKAR, ULLA R S
451 CENTRAL PARK DRIVE
LARGO, FL 33771 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[Signature] ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
2138 SW 9th RD
Ocala FL 34474

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
2138 SW 9th RD
Ocala FL 34474

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
500096366275
04/10/07--01044--007 **308.75

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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]* SUKHWINDER SINGH SKAR 4/2/07 3125023218
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #