

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000090428

Entity Name: SKYWAY TRANSPORT, INC.

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

5633 LAPUERTA DEL SOL BLVD. #304
ST. PETERSBURG, FL 33715

New Principal Place of Business:

9005 71ST AVE EAST
PALMETTO, FL 34221

Current Mailing Address:

5633 LAPUERTA DEL SOL BLVD. #304
ST. PETERSBURG, FL 33715

New Mailing Address:

9005 71ST AVE EAST
PALMETTO, FL 34221

FEI Number: 01-0741715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, STEPHEN L
5633 LAPUERTA DEL SOL BLVD. #304
ST. PETERSBURG, FL 33711 US

Name and Address of New Registered Agent:

SMITH, STEPHEN L
9005 71ST AVE EAST
PALMETTO, FL 34221 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.

SIGNATURE: _____

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SMITH, STEPHEN L
Address: 5633 LAPUERTA DEL SOL BLVD. #304
City-St-Zip: ST. PETERSBURG, FL 33711

Title: D () Delete
Name: SMITH, TINA L
Address: 5633 LAPUERTA DEL SOL BLVD. #304
City-St-Zip: ST. PETERSBURG, FL 33711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SMITH, STEPHEN L
Address: 9005 71ST AVE EAST
City-St-Zip: PALMETTO, FL 34221

Title: D (X) Change () Addition
Name: SMITH, TINA L
Address: 9005 71ST AVE EAST
City-St-Zip: PALMETTO, FL 34221

I hereby certify that the information supplied with this filing does not qualify for the 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 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: STEPHEN L SMITH

D

04/26/2005

Electronic Signature of Signing Officer or Director

Date