

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000127605

Entity Name: BLUE SKY MIAMI, INC.

FILED
Mar 07, 2005
Secretary of State

Current Principal Place of Business:

723 14TH PL
STE 9
MIAMI BEACH, FL 33139

Current Mailing Address:

723 14TH PL STE 9
MIAMI BEACH, FL 33119

New Principal Place of Business:

820 EUCLID AVE
STE 104
MIAMI BEACH, FL 33139

New Mailing Address:

820 EUCLID AVE, STE 104
MIAMI BEACH, FL 33119

FEI Number: 02-0654136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEINER, ROBERT MAXWELL
723 14TH PL
STE 9
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

GOMEZ, MICHAEL
1960 TYLER ST
HOLLYWOOD, FL 33020 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: MICHAEL GOMEZ/RMS

03/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHEINER, ROBERT MAXWELL
Address: 723 14TH PL, STE 9
City-St-Zip: MIAMI BEACH, FL 33139 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHEINER, ROBERT MAXWELL
Address: 820 EUCLID AVE, STE 104
City-St-Zip: MIAMI BEACH, FL 33139 US

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: R MAXWELL SHEINER

D

03/07/2005

Electronic Signature of Signing Officer or Director

Date