2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000104461

City-St-Zip:

CORAL GABLES, FL 33134

Entity Name: SKYWAY PROPERTIES, INC.

FILED Apr 21, 2008 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
965 NORTH NOB HILL ROAD				10097 CLEARY BLVD.		
306 PLANTATION, FL 33323				306 PLANTATION, FL 33323		
,				, and the second		
Current Mailing Address:				New Mailing Address:		
965 NORTH NOB HILL ROAD				10097 CLEARY BLVD.		
306 PLANTATION, FL 33323			-	306 PLANTATION, FL 33323		
FEI Number	: 20-0412657	FEI Number Applied For ()	FEI Numb	per Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
SUITE 302	37TH STREET 2	FL 33162 US				
	e named entity e of Florida.	submits this statement for the	purpose of	changing its registered	I office or registered agent, or both,	
SIGNATUI	RE:					
Electronic Signature of Registered Agent				Date		
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D (DELUCAS, FR. 12380 NW 11 PLANTATION,	STREET	N A	iitle: lame: kddress: iity-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LEVY, MICHÂE	A CIRCLE, 12TH FLOOR	N A	īitle: lame: kddress: City-St-Zip:	() Change () Addition	
Title: Name: Address:	FELS, JONATH) Delete HAN E A CIRCLE 12TH ELOOR	١	itle: lame:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

City-St-Zip:

SIGNATURE: FRANK T. DELUCAS DIR 04/21/2008