# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000111680

Entity Name: SKY ANGEL, INC.

FILED Feb 11, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

4001 TAMIAMI TRAIL NORTH 9132 STRADA PLACE SUITE 330 SUITE 400

NAPLES, FL 34103 US NAPLES, FL 34109 U

Current Mailing Address: New Mailing Address:

4001 TAMIAMI TRAIL NORTH 9132 STRADA PLACE SUITE 330 SUITE 400

NAPLES, FL 34103 US NAPLES, FL 34109 US

FEI Number: 51-0516771 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SALVATORI & WOOD, P.L.
4001 TAMIAMI TRAIL NORTH
SUITE 330
NAPLES, FL 34103 US
SALVATORI & WOOD, P.L.
9132 STRADA PLACE
SUITE 400
NAPLES, FL 34109 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: LEO J. SALVATORI 02/11/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

### **OFFICERS AND DIRECTORS:**

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: () Change () Addition

 Name:
 SOSA, JUAN
 Name:

 Address:
 2266 51ST TERRACE, SW
 Address:

 City-St-Zip:
 NAPLES, FL 34116 US
 City-St-Zip:

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.

SIGNATURE: JUAN SOSA DPST 02/11/2009