

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000038445

FILED
Oct 23, 2006
Secretary of State

Entity Name: SKYWAY INVESTIGATIONS AND SECURITY SERVICES, INC.

Current Principal Place of Business:

3707 15TH AVE W
BRADENTON, FL 34205

New Principal Place of Business:

7672 15TH E
SARASOTA, FL 34243

Current Mailing Address:

3707 15TH AVE W
BRADENTON, FL 34205

New Mailing Address:

7672 15TH E
SARASOTA, FL 34243

FEI Number: 06-1741564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TURFFS, ROBERT E
1444 FIRST ST STE B
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

ZONA, CASTO
4034 GREEN POINTE COURT
SARASOTA, FL 34233 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: CASTO ZONA

10/23/2006

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MURPHY, KEVIN
Address: 4802 51ST ST W APT 107
City-St-Zip: BRADENTON, FL 34210

Title: D () Delete
Name: ZONA, CASTO
Address: 4034 GREEN PT CT
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MURPHY, KEVIN F
Address: 7672 15TH E
City-St-Zip: SARASOTA, FL 34243

Title: PRES (X) Change () Addition
Name: ZONA, CASTO
Address: 7672 15TH E
City-St-Zip: SARASOTA, FL 34243

I hereby certify that the information supplied with this filing does not qualify for the 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: CASTO ZONA

PRES

10/23/2006

Electronic Signature of Signing Officer or Director

Date