


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 01, 2007 8:00 am**  
**Secretary of State**

03-01-2007 90009 035 \*\*\*150.00

<b>DOCUMENT # P05000054526</b> 1. Entity Name <b>SKI VERO, INC.</b>																													
Principal Place of Business <b>3002 GOLFVIEW DRIVE VERO BEACH, FL 32960</b>			Mailing Address <b>PO BOX 1414 VERO BEACH, FL 32961</b>																										
<b>NEW</b> 2. Principal Place of Business - No P.O. Box # <b>2233 17th ST</b>																													
Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																										
City & State <b>VERO BEACH FL</b>		City & State		4. FEI Number <b>54-2171881</b>																									
Zip <b>32960</b>		Country <b>INDIAN RIVER</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																									
6. Name and Address of Current Registered Agent <b>SPIEGEL &amp; UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code																										
8. 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. I am familiar with, and accept the obligations of registered agent.																													
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																													
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">PSTD MARKAY, PAUL C</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>3002 GOLFVIEW DRIVE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>VERO BEACH, FL 32960</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	PSTD MARKAY, PAUL C	<input type="checkbox"/> Delete	NAME	3002 GOLFVIEW DRIVE		STREET ADDRESS	VERO BEACH, FL 32960		CITY-ST-ZIP			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">PSTD MARKAY, Paul C</td> <td style="width:20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>2233 17th ST</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>VERO BEACH FL 32960</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	PSTD MARKAY, Paul C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	2233 17th ST		STREET ADDRESS	VERO BEACH FL 32960		CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																													
<b>SIGNATURE:</b> <u>Paul Markay</u> <b>Paul MARKAY</b>				<b>772-696-3780</b>																									
<small>SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date Daytime Phone #</small>																									