2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000117184

US

Entity Name: SKY MARINE, INC

FILED Apr 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

409 PEMBROKE ROAD HALLANDALE, FL 33009

Current Mailing Address: New Mailing Address:

409 PEMBROKE ROAD HALLANDALE, FL 33009 US

FEI Number: 20-4045725 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:

SOTOMAYOR, FRANCISCO

18856 NW 23 AVE

PEMBROKE DINES EL 33029 LIS

SOTOMAYOR, FRANCISCO

18856 NW 23 PLACE

PEMBROKE DINES EL 33029 LIS

PEMBROKE PINES, FL 33029 US PEMBROKE PINES, FL 33029 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: FRANCISCO SOTOMAYOR 04/02/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 SOTOMAYOR, FRANCISCO
 Name:
 SOTOMAYOR, FRANCISCO

 Address:
 18856 NW 23 AVE
 Address:
 18856 NW 23 PLACE

City-St-Zip: PEMBROKE PINES, FL 33026 US City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: VP () Delete Title: VP (X) Change () Addition
Name: PANKOW, PAWEL Name: SOTOMAYOR, HERLINDA

 Name:
 PANKOW, PAWEL
 Name:
 SOTOMAYOR, HERLINDA

 Address:
 11110 SW 9TH PLACE
 Address:
 18856 NW 23RD PLACE

 City-St-Zip:
 DAVIE, FL 33324 US
 City-St-Zip:
 PEMBROKE PINES, FL 33029 US

Title: S,T (X) Delete Title: () Change () Addition

 Name:
 SOTOMAYOR, HERLINDA
 Name:

 Address:
 18856 NW 23 AVENUE
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33029 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: HERLINDA SOTOMAYOR VP 04/02/2009