

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000158009

FILED
Sep 30, 2008
Secretary of State**Entity Name:** SKY ANGELS ENTERPRISE, INC.**Current Principal Place of Business:**1401 SW 44 AVE.
MIAMI, FL 33134**New Principal Place of Business:**6101 BLUE LAGOON DR.
STE: 105-C
MIAMI, FL 33126**Current Mailing Address:**1401 SW 44 AVE.
MIAMI, FL 33134**New Mailing Address:**6101 BLUE LAGOON DR.
STE: 105-C
MIAMI, FL 33126**FEI Number:** 80-0150808**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HERNANDEZ, IDALBERTO
1401 SW 44 AVE.
MIAMI, FL 33134 US**Name and Address of New Registered Agent:**GILES, CARLOS
6101 BLUE LAGOON DR
STE: 105-C
MIAMI, FL 33126 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: CARLOS GILES

09/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P/D () Delete
Name: IDALBERTO HERNANDEZ,
Address: 1401 SW 44 AVE.
City-St-Zip: MIAMI, FL 33134**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PSD (X) Change () Addition
Name: GILES, CARLOS
Address: 6101 BLUE LAGOON DR. STE: 150-C
City-St-Zip: MIAMI, FL 33126

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: CARLOS GILES

PSD

09/30/2008

Electronic Signature of Signing Officer or Director

Date