2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 10, 2008 8:00 am Secretary of State 03-24-2008 90063 027 ***150.00

DOCUMENT # P06000086406 1. Entity Name SKIMTECH, INC.									03 2 1 20	00 70 00.		130.00
Principal Place of Business 101 POND CYPRESS ROAD VENICE, FL 34292			1	Mailing Address 101 POND CYPRESS ROAD VENICE, FL 34292				66006333				
2. Principal Place of Business - No P.O. Box #				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.			01072008	Chg-P	CR2E	034 (12/08)	ı	
City & State				City & State			4. FEI Numb	512 4	22.7		oplied For ot Applicable	
Zip ——	Country			Zip Co		itry	5. Certificate of Status Desired Security Securi					
6. Name and Address of Current Re				tered Agent		Name		7. Name and	Address of Nev	v Registered	Agent	
SMETTS, ROBERT H				_		uddress (P.O. Box Number is Not Acceptable)						
101 POND CYPRESS ROAD VENICE, FL 34292						Street Addr	19 85691	O. BOX NUME	er is Not Accepta		-	
						<u> </u>						
				·		City				F	<u> </u>	·
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 Signature, hydrod or privated name oil registered against and table if applicable. (HOTE: Registered Against propulation required when remailating) OATE												
FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financia Trust Fund Contribution.								OO May Be ed to Fees				
10.	~- ~	OFFICERS	AND DIREC		11.			ADDITIONS	/CHANGES TO O	FFICERS AN	D DIRECTOR	IS IN 11
TITLE NAME	D Delete SMETTS, ROBERT H				TITLE						Change	Addition
STREET ADDRESS CITY-S1-ZIP	101 POND CYPRESS ROAD VENICE, FL 34292					ET ADDRESS -ST-ZIP						
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NAME STREET ADDRESS	2				ET ADDRESS							
CITY-SI-ZIP					1	-S1-ZIP						
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HAME				L. Delete	TITLE						☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP						ET ADORESS -SI-ZIP						
tur <u>r</u>				☐ Delete	TITLE					<u></u>	☐ Change	☐ Addition
NAME STREET ADDRESS					NAME	E Et adoress						
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STILE NAME				☐ Delete	TITLE						Change	Addition
STREET ADORESS						ET ADDRESS						
CITY-ST-ZIP	20016. 200	n information a section	Lucido de la	Gine done and mustice to		-\$1-219		in Charter 11	O Deside Ct-t-	164	esite state of the	
12. I hereby certify that the information supplied with this filing does not quelity 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 certify that I am en officer or direction of the corporation or the receiver or trustee employered tightecute tight 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 employeered.												
SIGNATURE: SIGNATURE AND TYPE OF FORM TED TEXTS OF DESCRIPTION OF												7.6