

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000110387

Entity Name: SKJ GROUP INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

15285 SW 107 LANE
SUITE 214
MIAMI, FL 33196 US

Current Mailing Address:

15285 SW 107 LANE
SUITE 214
MIAMI, FL 33196 US

New Principal Place of Business:

7105 SW 8 STREET
SUITE 306
MIAMI, FL 33144 US

New Mailing Address:

7105 SW 8 STREET
SUITE 306
MIAMI, FL 33144 US

FEI Number: 65-1288715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALLE, MAGALY
12585 SW 107 LANE
SUITE 214
MIAMI, FL 33196 US

Name and Address of New Registered Agent:

VALLE, MAGALY
7105 SW 8 STREET
SUITE 306
MIAMI, FL 33144 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: MAGALY VALLE

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VALLE, MAGALY
Address: 15285 SW 107 LANE SUITE 214
City-St-Zip: MIAMI, FL 33196 US

Title: SD () Delete
Name: MANRRIQUE, SARA L
Address: 15285 SW 107 LANE SUITE 214
City-St-Zip: MIAMI, FL 33196 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VALLE, MAGALY
Address: 7105 SW 8 STREET STE 306
City-St-Zip: MIAMI, FL 33144 US

Title: SD (X) Change () Addition
Name: MANRRIQUE, SARA L
Address: 7105 SW 8 STREET STE 306
City-St-Zip: MIAMI, FL 33144 US

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: MAGALY VALLE

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date