

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000127824

Entity Name: SKYWAY INSURANCE, INC

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

1517 US HWY 41 S
101
RUSKIN, FL 33570

New Principal Place of Business:

1517 US HWY 41 S
102
RUSKIN, FL 33570

Current Mailing Address:

1517 US HWY 41 S
101
RUSKIN, FL 33570

New Mailing Address:

1517 US HWY 41 S
102
RUSKIN, FL 33570

FEI Number: 20-5636724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPINOZA, FELIPA
1611 MERIDIAN ST
RUSKIN, FL 33570 US

Name and Address of New Registered Agent:

SANDOVAL, BILLY A
1517 US HYW 41 S
102
RUSKIN, FL 33570 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: BILLY ANGEL

03/23/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ESPINOZA, FELIPA
Address: PO BOX 7691
City-St-Zip: SUNCITY, FL 33586

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SANDOVAL, BILLY A
Address: 1517 US HWY 41 S #102
City-St-Zip: RUSKIN, FL 33570

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: BILLY SANDOVAL

PRES

03/23/2009

Electronic Signature of Signing Officer or Director

Date