

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000042189

Entity Name: SKREWGEL, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

6822 22ND AVENUE NORTH #430
SAINT PETERSBURG, FL 33710

New Principal Place of Business:

6822 22ND AVENUE NORTH
SUITE 430
SAINT PETERSBURG, FL 33710

Current Mailing Address:

6822 22ND AVENUE NORTH #430
SAINT PETERSBURG, FL 33710

New Mailing Address:

6822 22ND AVENUE NORTH
SUITE 430
SAINT PETERSBURG, FL 33710

FEI Number: 25-1690317

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LECLAIR, LISA
6822 22ND AVENUE NORTH #430
SAINT PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

LECLAIR, LISA R
6822 22ND AVENUE NORTH
SUITE 430
SAINT PETERSBURG, FL 33710 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: LISA RENE LECLAIR

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: LECLAIR, LISA R
Address: 6822 22ND AVENUE NORTH, #430
City-St-Zip: SAINT PETERSBURG, FL 33710

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: LISA RENE LECLAIR

PRES

04/28/2008

Electronic Signature of Signing Officer or Director

Date