2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000049664

Entity Name: SKYLINK GROUP, INC.

Address:

2191 REGENTS BLVD

City-St-Zip: WEST PALM BEACH, FL 33409

FILED May 07, 2009 Secretary of State

		(O, (O O) , (O			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	ENTS BLVD LM BEACH, F	L 33409			
Current M	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
	ENTS BLVD LM BEACH, F	L 33409			
FEI Number	: 20-8907379	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
	HILIP ENTS BLVD LM BEACH, F	L 33409 US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU					
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did nong ng Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ODUH, PHILIP 2191 REGENT		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title:	VP () Delete	Title:	() Change () Addition	

Address:

City-St-Zip:

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: PHILIP ODUH P 05/07/2009