2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000003950

FILED Apr 03, 2008 Secretary of State

Entity Nar	ne: SKYLAK	E INSURANCE AGENCY, INC					
Current P	rincipal Plac	e of Business:	New Prince	New Principal Place of Business:			
1810 NE M MIAMI, FL	IIAMI GARDE 33179	NS DR					
Current M	ailing Addre	ss:	New Maili	New Mailing Address:			
1810 NE M MIAMI, FL	IIAMI GARDE 33179	NS DR					
FEI Number:	umber: 65-0638174 FEI Number Applied For () FEI		FEI Number Not App	licable ()	Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
#306	N, LARS E ISLANDS B ALE, FL 3300						
	named entity of Florida.	submits this statement for the	ourpose of changing i	ts registered	l office or registered agent	;, or both,	
SIGNATUR	RE:						
	Electro	nic Signature of Registered Ag	ent		Date		
Election Car	npaign Financir	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	ERICKSEN, LA	LANDS BLVD #306	Title: Name: Address: City-St-Zip:	ERICKSEN,	SLANDS BLVD #103		

Title: () Delete Title: () Change () Addition

GARRO, JOHN C Name: Name: Address: 244 THREE ISLANDS BLVD Address: HALLANDALE, FL 33009 City-St-Zip: 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: LARS ERICKSEN **PRES** 04/03/2008