

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90262 014 ***150.00

DOCUMENT # P96000066463

1. Entity Name
SKYLIGHT PRODUCTIONS, INC.



Principal Place of Business
**201 RACQUET CLUB ROAD #N-421
FT. LAUDERDALE FL 33326**

Mailing Address
**201 RACQUET CLUB ROAD #N-421
FT. LAUDERDALE FL 33326**

2. Principal Place of Business
204 RIVERWALK CR.

3. Mailing Address
204 RIVERWALK CR.

Suite, Apt. #, etc.
Box D-13

Suite, Apt. #, etc.
Box D-13

City & State
FT. LAUDERDALE, FL.

City & State
FT. LAUDERDALE, FL.

Zip
33326

Country

Zip
33326

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0749167**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GARCIA, LUIS A
201 RACQUET CLUB RD.
#N-421
FT. LAUDERDALE FL 33326**

7. Name and Address of New Registered Agent

Name
204 RIVERWALK CR.
Street Address (P.O. Box Number is Not Acceptable)
Box D-13
City
FT. LAUDERDALE **FL** Zip Code
33326

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **LUIS A. GARCIA**
Signature, typed or printed name of registered agent and title if applicable.

(Not Required if Signature Required when Reinstating)

4/21/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARCIA, LUIS A 201 RACQUET CLUB RD., #N-421 FT. LAUDERDALE FL 33326	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST CHACOU-LOPEZ, MIRIAM 201 RACQUET CLUB RD., #N-421 FT. LAUDERDALE FL 33326	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARCIA, LUIS A 204 RIVERWALK CR. Box D-13 FT. LAUDERDALE, FL. 33326	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST CHACON-LOPEZ, MIRIAM 204 RIVERWALK CR. Box D-13 FT. LAUDERDALE, FL. 33326	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **LUIS A. GARCIA**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/03 **(851) 3850299**
Date Daytime Phone #

0362649 AV

CR2E034 (10/02)