

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000060919

Entity Name: SKYLAR II COMPANY

FILED  
Jan 27, 2009  
Secretary of State

## Current Principal Place of Business:

609 N. DIXIE HWY  
LAKE WORTH, FL 33460 US

## New Principal Place of Business:

1867 E TERRACE DRIVE  
LAKE WORTH, FL 33460 US

## Current Mailing Address:

609 N. DIXIE HWY  
LAKE WORTH, FL 33460 US

## New Mailing Address:

P.O. BOX 1275  
LAKE WORTH, FL 33460 US

FEI Number: 65-0777450

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOUTROS, BARBARA R  
609 N. DIXIE HWY  
LAKE WORTH, FL 33460 US

## Name and Address of New Registered Agent:

BOUTROS, BARBARA R  
1867 E TERRACE DRIVE  
LAKE WORTH, FL 33460 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: BARBARA BOUTROS

01/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BOUTROS, BARBARA R  
Address: 609 N. DIXIE HWY  
City-St-Zip: LAKE WORTH, FL 33460

Title: VP ( ) Delete  
Name: BOUTROS, MAGDY Z  
Address: 609 N. DIXIE HWY  
City-St-Zip: LAKE WORTH, FL 33460

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BOUTROS, BARBARA R  
Address: 1867 E TERRACE DRIVE  
City-St-Zip: LAKE WORTH, FL 33460

Title: VP (X) Change ( ) Addition  
Name: BOUTROS, MAGDY Z  
Address: 1867 E TERRACE DRIVE  
City-St-Zip: LAKE WORTH, FL 33460

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: BARBARA BOUTROS

P

01/27/2009

Electronic Signature of Signing Officer or Director

Date