

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000092145

Entity Name: SKRCCO, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

2509-3 SUCCESS DR
ODESSA, FL 33556

New Principal Place of Business:

2620 REGATTA DRIVE
SUITE 102
LAS VEGAS, NV 89128

Current Mailing Address:

SKRCCO, INC.
PO BOX 705
ODESSA, FL 33556

New Mailing Address:

2620 REGATTA DRIVE
SUITE 102
LAS VEGAS, NV 89128

FEI Number: 65-0809228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, STEVE
3469 TOLULA TERRACE
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

EMAS, JOSEPH I
1224 WASHINGTON AVENUE
MIAMI BEACH, FL 33139 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: JOSEPH I. EMAS

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROBERTS, STEVEN K
Address: 4550 47TH STREET W # 1813
City-St-Zip: BRADENTON, FL 34210

Title: V () Delete
Name: ROBERTS, SEAN M.
Address: 2317 FOREST CREST CIR.
City-St-Zip: LUTZ, FL 33549

Title: S (X) Delete
Name: ROBERTS, KYLE C.
Address: 2317 FOREST CREST CIR.
City-St-Zip: LUTZ, FL 33549

Title: T (X) Delete
Name: ROBERTS, STEVEN K.
Address: 4550 47TH STREET W # 1813
City-St-Zip: BRADENTON, FL 34210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: EVENESHEN, LEE
Address: 2620 REGATTA DRIVE, SUITE 102
City-St-Zip: LAS VEGAS, NV 89128 US

Title: P (X) Change () Addition
Name: CONRAD, BRIAN
Address: 2620 REGATTA DRIVE, SUITE 102
City-St-Zip: LAS VEGAS, NV 89128 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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: BRIAN CONRAD

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date