FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 13, 1999 8:00 am
Secretary of State
05-13-1999 90043 043 ***150.00

DOCUMENT # P98000008514 /OK

1. Corporation Name

Skoland Financial Inc.

Principal Place of Business	Mailing Address
6499 N.W. 9th Ave. Ste 201 Ft. Lauderdale, FL 33309	6499 N.W. 9th Ave Ste 201 Ft Lauderdale FL 33309

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01-28-98

2. Principal Place of Business	2a. Mailing Address
21 Same	26 Same
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

4. FEI Number: 65-0808774 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name: Steve Lindenbaum
82 Street Address (P.O. Box Number is Not Acceptable): 6499 N.W. 9th Ave
83: Ste 201
84 City: Ft. Lauderdale FL 85 Zip Code: 33309

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		
D Brunton Robert 6499 N.W. 9th Ave Ft. Lauderdale, FL 33309	☒ DELETE	
D	☐ DELETE	
	☐ DELETE	
	☐ DELETE	
	☐ DELETE	
	☐ DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Registered agent 1.2 NAME Steve Lindenbaum 1.3 STREET ADDRESS 6499 N.W. 9th Ave 1.4 CITY-ST-ZIP Ft Lauderdale, FL 33309	☒ Change	☐ Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change	☐ Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change	☐ Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change	☐ Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change	☐ Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change	☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR