

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90183 004 ***150.00

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DOCUMENT # P98000064946

1. Entity Name
SKY FLY UNIVERSAL, INC.



Principal Place of Business
**6065 NW 167 STREET
SUITE B14
MIAMI FL 33015**

Mailing Address
**6065 NW 167 STREET
SUITE B14
MIAMI FL 33015**



2. Principal Place of Business

2299 NW 108th AVE

3. Mailing Address

2299 NW 108th AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

MIAMI, FLORIDA 33172

MIAMI, FLORIDA

City & State

City & State

Zip

Country

USA

Zip

Country

USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0917670**

☒ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**ROJAS, MARIA A
15720 SW 51 MANOR
FORT LAUDERDALE FL 33331**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04/04/03

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **ROJAS, MARIA A**
STREET ADDRESS **15720 SW 51 MANOR**
CITY-ST-ZIP **FORT LAUDERDALE FL 33331**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☐ Delete
NAME **ROJAS, MARIA E**
STREET ADDRESS **15720 SW 51 MANOR**
CITY-ST-ZIP **FORT LAUDERDALE FL 33331**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **ROJAS, SANDRA**
STREET ADDRESS **15720 SW 51 MANOR**
CITY-ST-ZIP **FORT LAUDERDALE FL 33331**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
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CITY-ST-ZIP

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:

MARIA A ROJAS
PRESIDENT

04/04/03 (305) 513-9072

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/04

Daytime Phone #

CR2E034 (10/02)