

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000077439

Entity Name: SKYLAND JUPITER, INC.

FILED
Nov 26, 2008
Secretary of State

Current Principal Place of Business:

C/O DAVID DONTEN
505 SOUTH FLAGLER DRIVE SUITE 900
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

C/O DAVID DONTEN
505 SOUTH FLAGLER DRIVE SUITE 900
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 65-0861993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOON, BRIAN D
C/O DAVID DONTEN
505 SOUTH FLAGLER DRIVE SUITE 900
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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: BRIAN D MOON

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOON, BRIAN DAVID
Address: 7 CHARLES CT., MOUNTAINVIEW GLENCRUTCHERY
City-St-Zip: DOUGLAS, ISLE OF MAN 1M25HT,

Title: DST () Delete
Name: MOON, PAULINE ANN
Address: 7 CHARLES CT., MOUNTAINVIEW GLENCRUTCHERY
City-St-Zip: DOUGLAS, ISLE OF MAN 1M25HT, FL 33477

Title: VD () Delete
Name: MOON, MARK B
Address: 7 CHARLES CT., MOUNTAINVIEW GLENCRUTCHERY
City-St-Zip: DOUGLAS, ISLE OF MAN 1M25HT, FL 33477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: PAULINE ANN MOON

DST

11/26/2008

Electronic Signature of Signing Officer or Director

Date