## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000027965

Entity Name: SKYWAY EXPRESS, INC.

3327 W HARBOR VIEW AVE

TAMPA, FL 33611

Address:

City-St-Zip:

FILED Jan 06, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2849 EXECUTIVE DRIVE SUITE 150 CLEARWATER, FL 33762 US **New Mailing Address: Current Mailing Address:** P.O. BOX 320845 TAMPA, FL 33679 US FEI Number: 59-3566329 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDREW SERVICE CORP. OF FLORIDA 201 NORTH FRANKLIN STREET **SUITE 2100** TAMPA, FL 33602 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition CASCELLA, ROBERT F Name: Name: 3227 W HARBOR VIEW AVE Address: Address: City-St-Zip: TAMPA, FL 33611 City-St-Zip: ( ) Delete Title: Title: () Change () Addition CASCELLA, ANN MARIE Name: Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT CASCELLA PRES 01/06/2005