


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 27, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000052905</b> 1. Entity Name BLUE SKIES ELECTRONICS INC.		
Principal Place of Business 3329 CARAMBOLA CIRCLE SOUTH COCONUT CREEK, FL 33066	Mailing Address 3329 CARAMBOLA CIRCLE SOUTH COCONUT CREEK, FL 33066	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  BONANNO, ROBERT 3329 CARAMBOLA CIRCLE SOUTH COCONUT CREEK, FL 33066		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
10. OFFICERS AND DIRECTORS		<b>DO NOT WRITE IN THIS SPACE</b>
TITLE	P	
NAME	BONANNO, ROBERT	
STREET ADDRESS	3329 CARAMBOLA CIRCLE SOUTH	
CITY - ST - ZIP	COCONUT CREEK, FL 33066	
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Robert Bonanno</u> <b>ROBERT BONANNO</b>		Date <u>4/25/06</u> Daytime Phone # <u>(954) 895-2583</u>



04232006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0931715	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

U00000539210  
05/09/06-80090-023 150.00