

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000024537

Entity Name: SKYWAY SURGICAL, INC.

Current Principal Place of Business:

14818 LAKE MAGDALENE CIRCLE
TAMPA, FL 33613

Current Mailing Address:

14818 LAKE MAGDALENE CIRCLE
TAMPA, FL 33613 US

FEI Number: 26-2117181

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRIDA, ANDRES S
1106 NORTH FARANKLIN
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

Officer/Director Detail :

Title P
Name PINIELLA, DEREK
Address 14818 LAKE MAGDALENE CIRCLE
City-State-Zip: TAMPA FL 33613

I hereby 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 all other like empowered.

SIGNATURE: DEREK PINIELLA

PRESIDENT

04/01/2014

Electronic Signature of Signing Officer/Director Detail

Date