## **2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000012364

Entity Name: SKY INSURANCE GROUP CORP.

**Current Principal Place of Business:** 

2329 N STATE ROAD 7 HOLLYWOOD. FL 33021

**Current Mailing Address:** 

PO BOX 4195

HOLLYWOOD, FL 33083 US

FEI Number: 27-1880600 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DE LA CRUZ, TANIA 2329 N STATED RD7 HOLLYWOOD, FL 33021 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

FILED Apr 09, 2016

**Secretary of State** 

CC5076436056

## Officer/Director Detail:

Title PS

Name DE LA CRUZ, TANIA
Address 2329 N STATE RD 7
City-State-Zip: HOLLYWOOD FL 33021

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: TANIA DE LA CRUZ

**PRESIDENT** 

04/09/2016

Date