

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000082290

Entity Name: SKY INSURANCE LS CORP

Current Principal Place of Business:

3371 WEST 10TH AVE
APT 204
HIALEAH, FL 33012

Current Mailing Address:

3371 WEST 10TH AVE
APT 204
HIALEAH, FL 33012 US

FEI Number: 87-2749221

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SUAREZ PENA, LISMELI I
3371 WEST 10TH AVE
APT 204
HIALEAH, FL 33012 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 SUAREZ PENA, LISMELI I
Address 3371 WEST 10TH AVE APT 204
City-State-Zip: HIALEAH FL 33012

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: SUAREZ PENA , LISMELI , I

P

03/14/2022

Electronic Signature of Signing Officer/Director Detail

Date