

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000034544

**Entity Name:** SKY INSURANCE SERVICES INC

**Current Principal Place of Business:**

1395 BRICKELL AVENUE  
SUITE 2906  
MIAMI, FL 33131

**Current Mailing Address:**

1395 BRICKELL AVENUE  
SUITE 2906  
MIAMI, FL 33131 US

**FEI Number:** 88-2265872

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PENA, MANUELA  
1395 BRICKELL AVENUE  
SUITE 2906  
MIAMI, FL 33131 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:** MANUELA PENA

01/16/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P	Title	VP
Name	PENA, MANUELA	Name	PENA, RUBEN D
Address	1395 BRICKELL AVENUE SUITE 2906	Address	1395 BRICKELL AVENUE SUITE 2906
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

*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:** MANUELA PENA

PRESIDENT

01/16/2023

Electronic Signature of Signing Officer/Director Detail

Date