**2009 FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# F08000003947**  
**Entity Name:** SWAP-A-DEBT, INC.

**Current Principal Place of Business:**  
1001 BRICKELL BAY DRIVE, SUITE 1804  
MIAMI, FL  33131

**New Principal Place of Business:**  
940 LINCOLN RD  
SUITE 220  
MIAMI BEACH, FL  33139

**Current Mailing Address:**  
1001 BRICKELL BAY DRIVE, SUITE 1804  
MIAMI, FL  33131

**New Mailing Address:**  
940 LINCOLN RD  
SUITE 220  
MIAMI BEACH, FL  33139

**FEI Number:** 80-0142655  
**FEI Number Applied For:** ( )  
**FEI Number Not Applicable:** ( )  
**Certificate of Status Desired:** ( )

**Name and Address of Current Registered Agent:**  
SIROTA, GEORGE  
1001 BRICKELL BAY DRIVE.  
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:**  
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**OFFICERS AND DIRECTORS:**

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<thead>
<tr>
<th>Title</th>
<th>CP</th>
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<tbody>
<tr>
<td>Name</td>
<td>DEFEUDIS, EDWARD C</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td>541 BAY POINT RD</td>
<td></td>
</tr>
<tr>
<td>City-St-Zip</td>
<td>MIAMI, FL  33137</td>
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<tr>
<td>Name</td>
<td>GARIBALDI, MARCO</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td>9200 SUNSET BLVD, SUITE 825</td>
<td></td>
</tr>
<tr>
<td>City-St-Zip</td>
<td>LOS ANGELES, CA 90069</td>
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**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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<thead>
<tr>
<th>Title</th>
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

**SIGNATURE:** EDWARD C DEFENDIS  
**Date:** 02/23/2009

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**Electronic Signature of Signing Officer or Director**  
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**Date**  
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