

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000062843 (6)**

1. Corporation Name
S.W.I. CUSTOMS BROKERS, INC.



Principal Place of Business: **815 NW 57TH AVE SUITE 307 MIAMI FL 33126**
Mailing Address: **815 NW 57TH AVE SUITE 307 MIAMI FL 33126**

3. Date Incorporated or Qualified: **09/09/1993**
3a. Date of Last Report: **04/24/1995**
4. FET Number: **65-0436536**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: **7975 NW 154th Street**
2a. Mailing Address: **7975 NW 154th Street**
22. Suite, Apt. #, etc.: **300**
27. Suite, Apt. #, etc.: **300**
23. City & State: **Miami Lakes, FL**
28. City & State: **Miami Lakes, FL**
24. Zip: **33016** 25. Country: **USA**
29. Zip: **33016** 30. Country: **USA**

9. Name and Address of Current Registered Agent
**BURKHART, STEVEN
815 NW 57TH AVE
SUITE 307
MIAMI FL 33126**

10. Name and Address of New Registered Agent
81. Name: **Burkhart, Steven**
82. Street Address (P.O. Box Number is Not Acceptable): **7975 NW 154th Street**
83. Suite: **Suite 300**
84. City: **Miami Lakes, FL** 85. Zip Code: **33016**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BURKHART, STEVEN	
STREET ADDRESS	815 NW 57TH AVE SUITE 307	
CITY - ST - ZIP	MIAMI FL 33126	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PAULSEN, DAVID H	
STREET ADDRESS	815 NW 57TH AVE SUITE 307	
CITY - ST - ZIP	MIAMI FL 33126	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WHITLEY, HEBER	
STREET ADDRESS	815 NW 57TH AVE SUITE 307	
CITY - ST - ZIP	MIAMI FL 33126	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Burkhart, Steven	
1.3 STREET ADDRESS	7975 NW 154th St., #300	
1.4 CITY - ST - ZIP	Miami Lakes, FL 33016	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Paulsen, David H	
2.3 STREET ADDRESS	7975 NW 154th St., #300	
2.4 CITY - ST - ZIP	Miami Lakes, FL 33016	
3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Whitley, Heber	
3.3 STREET ADDRESS	7975 NW 154th St., #300	
3.4 CITY - ST - ZIP	Miami Lakes, FL 33016	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *Steven Burkhart*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

22 APR. 96 305-826-9996

CR2E084 (12/95)