2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004
Secretary of State

DOCUMENT# P97000084481

Entity Name: SWEET INTERIORS, INC.

Current Principal Place of Business:

1805 SW 12 CT
CAPE CORAL, FL 33991 US

New Principal Place of Business:

Current Mailing Address:

1805 SW 12 CT
CAPE CORAL, FL 33991 US

New Mailing Address:

FEI Number: 65-0784557 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLASSETTI, DAMIAN
1805 SW 12 CT
CAPE CORAL, FL 33991 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CLASSETTI, DAMIAN
Address: 1805 SW 12H CT.
City-St-Zip: CAPE CORAL, FL 33991

Title: VP ( ) Delete
Name: CLASSETTI, NICK
Address: 5217 S.W. 28TH PL
City-St-Zip: CAPE CORAL, FL 33914

Title: ST (X) Delete
Name: GAFFORD, TOMMY
Address: 3716 S.W. 7TH PL
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAMIAN CLASSETTI P 04/19/2004

Electronic Signature of Signing Officer or Director Date