2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003947

LOS ANGELES, CA 90069

City-St-Zip:

Entity Name: SWAP-A-DEBT, INC.

FILED Feb 23, 2009 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
1001 BRICKELL BAY DRIVE, SUITE 1804 MIAMI, FL 33131			940 LINCOLN RD SUITE 220 MIAMI BEACH, FL 3		
Current N	lailing Addre	ss:	New Mailing Addres	New Mailing Address:	
1001 BRICKELL BAY DRIVE, SUITE 1804 MIAMI, FL 33131			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:	Name and Address	Name and Address of New Registered Agent:	
MIAMI, FL	CKELL BAY DF 33131 US	···	purpose of changing its register	ed office or registered agent, or both,	
SIGNATUI					
Election Ca		nic Signature of Registered Aqgrust Fund Contribution ().	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CP (DEFEUDIS, EE 541 BAY POIN MIAMI, FL 331	T RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	GARIBALDI, M) Delete ARCO BLVD SUITE 625	Title: Name: Address:	() Change () Addition	

City-St-Zip:

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 DEFEUDIS CP 02/23/2009