2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT #	P00000045736
I. Entity Name	
SWISS WATCHMAKER	S AND CO., INC.



FILED Jan 21, 2003 8:00 am Secretary of State

1. Entity Name SWISS WATCHMAKERS AND CO., INC.							01-21-2003 90113 030 ***150.00			
SWISS WATE 1688 MERIDI MIAMI DEAC	Place of Busin	•	SWIS 1688 MIAM 3. Ma	DIG Address S WATCHMAKERS MERIDIAN AVE #2 II BEACH FL 33139 IIIng Address 176/6 Ie, Apt. #, etc.	203	s A	vene			
City & Sta		1 - 0 /		& State	, ,			4. FEI Number 65-1055427 Applied For	٦	
Sun Zip 32	7 7:3160	S/ES Beach	Zip	Sunny Zs 221/2	Coun	try A	FL	5. Certificate of Status Desired S8.75 Additional	е	
		and Address of Curren	t Register	33 (60	10	3/1		Fee Required	4	
	o. Hame	and Address of Carren	it negistere	ad Agent		Name	,,	7. Name and Address of New Registered Agent	-	
HART, DI	AVID J /					_	H0	art, David J	╛	
	ATCHMAKE	RS				Street A	ddress (P. Wiss	P.O. Box Number is Not Acceptable)		
	RIDIAN AVE							1	1	
	CH FL 33139				;	- 77	016	Collins Avenue		
)					City	SON	Toles Reach FL Zip Code	١	
8. The above the obliga	e named entity	y submits this statement f ered agent.	for the purp	ose of changing i	ts registere	d office o		ed agent, or both, in the State of Florida. I am familiar with, and accep		
			-	-	D	1-:-1/	· N.	-lilla Daniel 1/1/2		
SIGNATURE		or printed name of registered agen	t and title if app	ilicable. (NO	TE: Registered	Agent signat	ure required w	schilles froident 1/16/03 when reinstating)		
Afte	er May 1, 200	! FEE IS \$150.00 03 Fee will be \$550.00				•		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees		
	K Payable to	Florida Department o	of State						1	
10.								ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
	n .	OFFICERS AND	DIRECTO		11.		_	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TI		
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE