

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J37216

**FILED**  
**Mar 10, 2018**  
**Secretary of State**  
**CC1948996461**

**Entity Name:** SWEDEN TRADE INC.

**Current Principal Place of Business:**

C/O ULF T. SANDSTROM  
9 SOUTH BOULEVARD OF PRESIDENTS  
SARASOTA, FL 34236-1423

**Current Mailing Address:**

C/O ULF T. SANDSTROM  
9 SOUTH BOULEVARD OF PRESIDENTS  
SARASOTA, FL 34236-1423

**FEI Number:** 59-2712875

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SANDSTROM, ULF T.  
9 SOUTH BOULEVARD OF PRESIDENTS  
SARASOTA, FL 33577 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CGO  
Name SANDSTROM, ULF T  
Address C/O ULF T. SANDSTROM  
9 SOUTH BOULEVARD OF  
PRESIDENTS  
City-State-Zip: SARASOTA FL 34236-1423

Title CEO  
Name SANDSTROM, ANNIKA  
Address 9 SOUTH BOULEVARD OF  
PRESIDENTS  
City-State-Zip: SARASOTA FL 34236-1423

Title CFO  
Name SANDSTROM, FREDRIK U.  
Address 9 SOUTH BOULEVARD OF  
PRESIDENTS  
City-State-Zip: SARASOTA FL 34236-1423

Title CMO/CTO  
Name SANDSTROM, MIKAEL P  
Address 9 SOUTH BOULEVARD OF  
PRESIDENTS  
City-State-Zip: SARASOTA FL 34236-1423

*I hereby 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 all other like empowered.*

**SIGNATURE:** ULF SANDSTROM

CGO

03/10/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date