2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 07, 2007 08:00 All Secretary of State DOCUMENT # F90437 1. Entity Name SWEETINGS'S FOUR, INC. Principal Place of Business Mailing Address P.O. BOX 1060 KEY LARGO FL 33037-1060 P.O. BOX 1060 KEY LARGO FL 33037-1060 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt # etc Suite, Apt. #, etc 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Number 59-2211580 Not Applicable Zip 7in Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SWEETING, GERALD L 96120 OVERSEAS HIGHWAY Street Address (P.O. Box Number is Not Acceptable) KEY LARGO FL 33037 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent, SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be .After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 HILE ☐ Delete MLC. ☐ Change ☐ Addition SWEETING, GERALD L NAME NAME 96120 OVERSEAS HIGHWAY STREET ADDRESS STREET ADDRESS KEY LARGO FL U00000626236 CITY-ST-ZIP CITY-ST-ZIP 02/15/07-80011-008 (150.0) Addition THILE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-S1-7IP CITY-ST-ZIP THLE Delete IIILE ☐ Change ☐ Add(tion) NAME NAME STREET ANDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Change TITLE Delete TITLE ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7tP IIIIE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-S1-7IP CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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: GERALD L. SWEETING-FEB. 6, 2007 - 305-852-4416

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