

FILE NOW: FILING FEE AFTER MAY 1 IS \$ 25.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. M...
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAR -6 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H71284 (4)
1. Corporation Name
SWISS AMERICAN INVESTORS, INC.

Principal Place of Business Mailing Address
703 LAKESIDE BOULEVARD BOCA RATON FL 33434
10792 QUEEN PALM Ct. BOCA RATON FL 33498
703 LAKESIDE BOULEVARD BOCA RATON FL 33434
10792 QUEEN PALM COURT. BOCA RATON FL 33498

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **08/14/1985** 3a. Date of Last Report **05/01/1994**
4. FEI Number **65-0037167** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country Zip 29 Country 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GAYLORD, MARC R.
4800 N FEDERAL #306B
BOCA RATON FL 33431**

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **FL** B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Print or type full name of registered agent and the filer.)

(Date Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	D
NAME	BETTISON, MARIA
STREET ADDRESS	APARTADO 68288
CITY-ST-ZIP	CARACAS, VENEZUELA
TITLE	D
NAME	GAYLORD, MARC R.
STREET ADDRESS	4800 N FEDERAL #306B
CITY-ST-ZIP	BOCA RATON FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information is based on the annual report or supplemental annual report in true and accurate fact that my departure shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the trustee or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report, or on an amendment with an address.

SIGNATURE: *Maria E. Bettison*
SIGNATURE AND TYPED (OR PRINTED) NAME OF REGISTERED AGENT OR DIRECTOR