2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 26, 2005 08:00 AM DOCUMENT # J37216 **Secretary of State** 1. Entity Name SWEDEN TRADE INC. Principal Place of Business Mailing Address C/O ULF T. SANDSTROM C/O ULF T. SANDSTROM 9 SOUTH BOULEVARD OF PRESIDENTS 9 SOUTH BOULEVARD OF PRESIDENTS SARASOTA, FL 34236-1423 SARASOTA, FL 34236-1423 CR2E034 (10/03) 03232005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2712875 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SANDSTROM, ULF T. 9 SOUTH BOULEVARD OF PRESIDENTS SARASOTA, FL 33577_ IN THIS SPACE 3. 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 colligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be U00000276929 FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 03/26/05-80008-022 150.00 10. OFFICERS AND DIRECTORS PD TITLE SANDSTROM, ULF T. NAME STREET ADDRESS 1722 NORTH DRIVE CITY-ST-7P SARASOTA, FL 34239 TITLE SANDSTROM, ANNIKA NAME STREET ADDRESS 1722 NORTH DRIVE CTTY-ST-ZIP SARASOTA, FL 34239 TITLE NAM ราหะร้า หมะหยรร DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZP TILLE NAME

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: W

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> ULF GNATURE AND TYPED OR PAINTED NAME OF SIGNING OFFICER OR DIRECTOR