

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED

①

97 AUG 19 AM 10:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # K65333 (2)  
1. Corporation Name  
SWISS DESIGNS INC.



Principal Place of Business  
2045 N.W. 24TH AVE.  
MIAMI FL 33142

Mailing Address  
2045 N.W. 24TH AVE.  
MIAMI FL 33142

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		02/13/1989	04/23/1996
22		27		4. FEI Number	Applied For
City & State		City & State		65-0098213	Not Applicable
23		28		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24		29		7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.	Yes No
Country		Country			
25		30			

g. Name and Address of Current Registered Agent

SWISSA, AENRI  
8034 W 21 CT.  
HIALEAH FL 33016

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 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  
Signature, typed or printed name of registered agent and title if applicable  
(NOTE: Registered Agent signature required when reinstating)  
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	
NAME	SWISSA, AENRI	1.2 NAME	
STREET ADDRESS	19390 NW 82ND CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	DV	2.1 TITLE	
NAME	SWISSA, MONIQUE	2.2 NAME	
STREET ADDRESS	19390 NW 82ND CT	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE  
Signature, typed or printed name of registered agent and title if applicable  
(NOTE: Registered Agent signature required when reinstating)  
DATE

CR2E034 (4/97)

Accounting Office  
**KIM MARKS, C.P.A., P.A.**  
*CERTIFIED\* PUBLIC ACCOUNTANT*  
1900 Biscayne Boulevard - Suite 290  
North Miami, Florida 33181-2726

(2)

Toll Free USA: 888-895-5815  
Internet: KimCPA@ix.netcom.com

Tel: (305) 895-5815  
Fax: (305) 895-6273

July 23, 1997

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

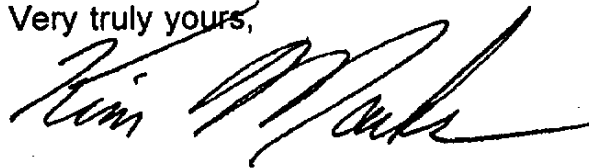
RE: Swiss Designs Inc. / Document #K65333 (2)  
19390 NW 82nd Court  
Hialeah, FL 33015-5311

Dear Sirs:

I am the accountant for the above-mentioned corporation. I am writing this letter of explanation per the request of the Division of Corporations. My client received a 2nd notice, but never the first. We are sending the regular amount which is \$165.00 as instructed.

Thanking you in advance for your kind and prompt attention in this matter, I remain.

Very truly yours,



Kim Marks, CPA