2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 12, 2007 08:00 Al Secretary of State

DOCUMENT # L14042 1. Entity Name SSW INVESTMENTS CORPORATION, INC.				Secretary of St		
	e of Business SINGHAM RD 33774 US	Mailing Address 13489 WALSHINGHAM RD LARGO, FL 33774 US	1,	# + ## (1 #) #	21 11 11 12 13 14 15 16 16 16 16 16 16 16 16 16 16 16 16	8) BIZII GJEN BIBN 218N BIBN BIBN BIBN 11 1821
DO NOT WRITE IN THIS SPACE			CE	01152007 No Chg-P CR2E034 (11/05) 4. FEI Number		
WASSERMAN, SHEILA 6201 BURLINGTON AVE N ST PETERSBURG, FL 33710			DO NOT WRITE IN THIS SPACE			
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 accepted agent signature required when remarkating. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when remarkating) PATE FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 P. Election Campaign Financing Added to Fees						
10. OFFICERS AND DIRECTORS			<u> </u>		<u>. </u>	- <u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WASSERMAN, SHEILA 6201 BURLINGTON AVE N ST PETERSBURG, FL 33710				U0000 02/20/07:	0631342 -80044-005 150.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE						

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 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.

SICMATURE.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SHEILA WASSERMAN

2/9/07 727.596.6315

Daytime Phone #