## 2008 FOR PROFIT CORPORATION

SIGNATURE:

## FILED Feb 12, 2008 8:00 am Secretary of State ANNUAL REPORT DOCUMENT #L36885 1. Entity Name 02-12-2008 90007 040 \*\*\*150 00 SWQ HOLDINGS, INC. Principal Place of Business Mailing Address 595 S. FEDERAL HIGHWAY, SUITE 600 595 S. FEDERAL HIGHWAY, SUITE 600 BOCA RATON, FL 33432 BOCA RATON, FL 33432 02042008 CR2E034 (12/06) Applied For 4. FEI Number 65-0163084 Not Applicable \$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 JEFFREY H BECK TRUSTEE FOR SE BANKING CORP 225 NORTHEAST MIZNER BOULEVARD SUITE 300 BOCA RATON, FL 33432 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PVPS TITLE ☐ Defete TITLE Change ☐ Addition BECK, JEFFREY H NAME STREET ADDRESS 225 NE MIZNER BLVD., SUITE 300 STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33432 CITY - ST - ZIP \_\_\_Change TITLE ☐ Delete TITLE Addition BECK, JEFFREY H NAME NAME Edenal Highway, DUTE 600 STREET ADDRESS 225 NE MIZNER BLVD., SUITE 300 STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33432 CITY-ST-ZIP TITLE ☐ Defete TITLE Addition □ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$1-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing 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.