2003 FOR PROFIT CORPORATION

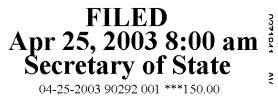
UNIFORM BUSINESS REPORT (UBR)

L66612

DOCUMENT #

1. Entity Name THE DASW CORP.





547 GOLDEN GOLDEN BEA		Mailing Address 547 GOLDEN BEACH DR. GOLDEN BEACH FL 33160 3. Mailing Address						
z. riiicipai r	riace of business	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES		
City & State		City & State		4.	&5-0193821	Applied For Not Applicable		
Zìp	Country Zip		Coun	5. Certificate of Status Desired Fee Required				
	6. Name and Address of Current	Registered Agent		 	~7.	Name and Address of New Registered Agent		
ALVAREZ, SANDRA				Name				
			Street Address		dress (P.O. I	(P.O. Box Number is Not Acceptable)		
_	DEN BEACH DR.							
GOLDEN	BEACH FL 33160							
				City		FL Zip C	ode	
	ions of registered agent.					gent, or both, in the State of Florida. I am familiar wit	h, and accept	
	Signature, typed or printed name of registered agent	and title if applicable.	NOTE: Registere	d Agent signature	required when r	reinstating) DATE		
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 r Payable to Florida Department o	of State					.00 May Be led to Fees	
10.	OFFICERS AND	DIRECTORS	11.		AI	DDITIONS/CHANGES TO OFFICERS AND DIRECTO	RS IN 11	
TITLE NAME STREET ADM SS CITY-ST-ZIP	DPS ALVAREZ, SANDRA V. 547 GOLDEN BEACH DR GOLDEN BEACH FL	☐ Delete				Change	e 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	. 	_ ☐ Delete				☐ Change	e Addition	
TITLE. NAME STREET ADDRESS CITY-ST-ZIP		Oelete	NAMI Stre			T~ . — Change	: ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete				□ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY-	ET ADDRESS 91-ZIP		☐ Change		
indicated of the corp changed.	ertify that the information supplied with on this report or supplemental report is ocration or the receiver or trusted emp or on an attachment with an advises.	itins filing does not qualify strue and accurate and the owered to execute this repower with all pines like empower	r for the ever at my signat ort as requir ed	nption stated ure shall have ed by Chapte	n Section e the same er 607, Flori	119.07(3)(i), Florida Statutes. I further certify that the legal effect as if made under oath; that I am an officida Statutes; and that my name appears in Block 10	eintormation er or director or Block 11 if	

SIGNATURE: