## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE. Sandra B. Mortham

	1996	DIVISION C	etary of Sta OF CORPOR					
1. Corporation		660 (9)		<del></del>				
SWISS	S ENTERPRISES, INC.				1 18 3 18 0 18 0 18 18 18 18 18 18 18 18 18 18 18 18 18	1 <b>8 8</b> (1 <b>8</b> (8 <b>8</b> )		######################################
Principal Place	e of Business	Mailing Address						
2789 NE 37		2789 NE 37TH DR.						
	DALE FL 33308-3326	FT. LAUDERDALE FL	33308-3326					
· · <u></u>					3. Date incorporated or Qualified 01/13/1988	3a. Date 04	of Last R /20/19	•
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number 65-0025467		-	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	[]		Additional
City & State	е	City & State	<del></del>					Required
3		28			6. Election Campaign Financing Trust Fund Contribution	[]		May Be
Zip	Country	Zip		ıntry	8. This corporation has liability for			
<u> </u>	25 9. Name and Address of Curre	29 ent Registered Agent	30	<u> </u>	Florida Statutes Yes  10. Name and Address of New R	[]No	cont	
				81 Name	IV. Name and Address of 1988 H	egistered A	Acur	
	Y, THOMAS			82 Street Add	dress (P.O. Box Number is Not Acceptab	le)		
2789 NE 37TH DR				L				
	Broward Blvd. Iderdale Fl 33308			83				
FI. LAU	INCUNATE LE 33300			84 City		FL	85 Zıç	Code
or register	red agent, or both, in the State of Flo	02 and 607.1508, Florida Statu orida. Such change was author	tes, the abo	ove-named corpo	oration submits this statement for the pur	pose of chan	iging its re	egistered offic
IGNATURE _	red agent, or both, in the State of Flo ith, and accept the obligations of, Se Signature, typed or printed name of registered age			we-named corpo corporation's boa Agent signatura reque	oration submits this statement for the pur ard of directors. I hereby accept the apport and when renstating?	pose of chan pointment as re	iging its re egistered	egistered offic agent. I am
IGNATURE _	Signature, typed or printed name of registered age	ent and title if applicable (ND DIRECTORS	OTE Registered	Agent signatura re jur		DATE CERS AND D	DIRECTO	RS IN 12
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oath; that I am an officer or clirector 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.

Johnson Signing OFFICER OR DIRECTOR