2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P00000036870

Entity Name

SWR BOCA TECH HOLDINGS, INC.



Principal Place of Business

7120 LIONS HEAD LANE BOCA RATON, FL 33496 Mailing Address

7120 LIONS HEAD LANE BOCA RATON, FL 33496

FILED Jan 20, 2004 08:00 AM Secretary of State



01142004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-1005650 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

M & W AGENTS, INC. 2101 CORPORATE BLVD., SUITE 107 BOCA RATON, FL 33431-7343

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		}				
8. The above the obligat	rnamed entity submits this statement for the plions of registered agent.	ourpose of changing its registered	office or	registered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE Signature typod or priviled name of registered agont and title if applicable (NOTE, Registered Agent signature required when remain				e required when reinstaling)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
THEE NAME STREET ADDRESS CITY-ST-ZIP	P RUBIN, SHELDON W 7120 LIONS HEAD LN BOCA RATON, FL 33496				U00000007074	
HTLE NAME STREET ADDRESS CHY+ST+ZIP					01/20704-80008-018 150.00	
TITLE NAME STREET ADDRESS CITY+ST-ZIP				DO	NOT WRITE	
fifile Name Strill Addriess City-St-27P				IN '	THIS SPACE	
THEE NAME STREET ADDRESS CHY-ST-ZIP					-	
HILE NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Truther 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/04

561488-4445

Daytime Phone #