

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000113678

FILED
Jan 07, 2004
Secretary of State

Entity Name: SWIFT MANAGEMENT SOLUTIONS, INC.

Current Principal Place of Business:

1750 UNIVERSITY CRIVE #205
POMPANO BEACH, FL 33071

New Principal Place of Business:

1750 UNIVERSITY DRIVE #205
CORAL SPRINGS, FL 33071

Current Mailing Address:

1750 UNIVERSITY CRIVE #205
POMPANO BEACH, FL 33071

New Mailing Address:

FEI Number: 65-1061284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUBROW DUKER & ASSOCIATES, P.A.
2832 UNIVERSITY DR.
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

SWIFT, NICOLE
1750 UNIVERSITY DRIVE #205
CORAL SPRINGS, FL 33071

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.

SIGNATURE: NICOLE SWIFT

01/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SWIFT, NICOLE
Address: 4885 N.W. 10TH ST.
City-St-Zip: COCONUT CREEK, FL 33063

Title: VP () Delete
Name: SWIFT, CHARLES
Address: 4885 NW 10TH STREET
City-St-Zip: POMPANO BEACH, FL 33063

Title: SEVP () Delete
Name: AMAYTO, DOROTHY
Address: 750 N OCEAN BLVD #1903
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SWIFT, NICOLE
Address: 7114 NW 48TH LANE
City-St-Zip: COCONUT CREEK, FL 33073

Title: VP (X) Change () Addition
Name: SWIFT, CHARLES
Address: 7114 NW 48TH LANE
City-St-Zip: COCONUT CREEK, FL 33073

Title: SEVP (X) Change () Addition
Name: AMATO, DOROTHY
Address: 750 N OCEAN BLVD #1903
City-St-Zip: POMPANO BEACH, FL 33062

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICOLE SWIFT

DP

01/07/2004

Electronic Signature of Signing Officer or Director

Date