2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000114785

1. Entity Name

FLORIDA'SWG BIRTHPLACE EQUITY INVESTORS CORPORATION

Principal Place of Business

3399 PGA BOULEVARD

SUITE 240

PALM BEACH GARDENS, FL 33410

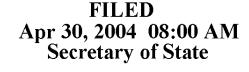
Mailing Address

3399 PGA BOULEVARD

SUITE 240

SIGNATURE AND OPEN OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PALM BEACH GARDENS, FL 33410



CR2E034 (10/03)

Daytime Phone #



DO NOT WRITE IN THIS SPACE

01102004 110 ong 1	O112200+ (1	G-00)	
4. FEI Number	,	Applied For	
65-1069267		Not Applicable	
5. Certificate of Status Desired		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

GALGANO, JAMES V 3399 PGA BLVD STE 240 WEST PALM BEACH, FL 33410

DO NOT WRITE IN THIS SPACE

04462004

the obligations of registered agent.							
SIGNATURE Signature Typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			ng 🔲	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS				000000142301	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SINA, MALCOLM S 3399 PGA BLVD STE 240 WEST PALM BEACH, FL 33410					U00000142301 04/30/04-80045-016 158.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GALGANO, JAMES V 3399 PGA BLVD STE 240 WEST PALM BEACH, FL 33410						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY ST-ZIP					IN '	THIS SPACE	
TITLE NAME STREET ADORESS CITY - ST- ZIP							
THLE NAME STREET ADDRESS CITY - ST - ZIP							
12. I hereby certify that the information supplied with this filling does not qualify 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 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 emphasized 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 employment.							