

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 08, 2007 08:00 AM
Secretary of State

DOCUMENT # P01000033718

1. Entity Name
SWA INTERNATIONAL, INC.



Principal Place of Business
**1160 EMERALD DR
SINGER ISLAND, FL 33404**

Mailing Address
**1160 EMERALD DR
SINGER ISLAND, FL 33404**



03052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-3705906

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**STEWART, JAMES M ESQ
1211 THE PLAZA
SINGER ISLAND, FL 33404**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WAGNER, JERALD
STREET ADDRESS	1160 EMERALD DR
CITY-ST-ZIP	SINGER ISLAND, FL 33404
TITLE	D
NAME	SWEET, ROBIN
STREET ADDRESS	1160 EMERALD DR
CITY-ST-ZIP	SINGER ISLAND, FL 33404
TITLE	P
NAME	WAGNER, JERALD
STREET ADDRESS	1160 EMERALD DRIVE
CITY-ST-ZIP	SINGER ISLAND, FL 33404
TITLE	VP
NAME	SWEET, ROBIN
STREET ADDRESS	1160 EMERALD DRIVE
CITY-ST-ZIP	SINGER ISLAND, FL 33404
TITLE	S
NAME	WAGNER, JERALD
STREET ADDRESS	1160 EMERALD DRIVE
CITY-ST-ZIP	SINGER ISLAND, FL 33404
TITLE	T
NAME	SWEET, ROBIN
STREET ADDRESS	1160 EMERALD DRIVE
CITY-ST-ZIP	SINGER ISLAND, FL 33404

~~03/16/07-00040-001 150.00~~
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03/16/07-00040-001 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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: Jerald Wagner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5 March 07 561-842-4656
Date Daytime Phone #