

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000088369

FILED
Jan 25, 2004
Secretary of State

Entity Name: ASWANN INTERNATIONAL, INC.

Current Principal Place of Business:

673 NEUMANN VILLAGE CT.
OCOE, FL 34761

New Principal Place of Business:

6413 WESTGATE DRIVE
SUITE 112
ORLANDO, FL 32835

Current Mailing Address:

673 NEUMANN VILLAGE CT.
OCOE, FL 34761

New Mailing Address:

6413 WESTGATE DRIVE
SUITE 112
ORLANDO, FL 32835

FEI Number: 54-2070005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSTAFA, SHANNON L
673 NEUMANN VILLAGE CT.
OCOE, FL 34761

Name and Address of New Registered Agent:

MOSTAFA, MOHAMED M
6413 WESTGATE DRIVE
SUITE 112
ORLANDO, FL 32835

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: MOHAMED M. MOSTAFA

01/25/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOSTAFA, MOHAMED M
Address: 673 NEUMANN VILLAGE CT.
City-St-Zip: OCOE, FL 34761

Title: D (X) Delete
Name: MOSTAFA, SHANNON L
Address: 673 NEUMANN VILLAGE CT.
City-St-Zip: OCOE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOSTAFA, MOHAMED M
Address: 6413 WESTGATE DRIVE, SUITE 112
City-St-Zip: ORLANDO, FL 32835

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MOHAMED M. MOSTAFA

PRES

01/25/2004

Electronic Signature of Signing Officer or Director

Date