2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000058457

Entity Name: S&W ENTERPRISE, INC

FILED Feb 08, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

20291 NE 30TH AVENUE SUITE 115 460 LOCK ROAD MIAMI, FL 33180 159

DEERFIELD BEACH, FL 33442

Current Mailing Address: New Mailing Address:

20291 NE 30TH AVENUE SUITE 115 460 LOCK ROAD

MIAMI, FL 33180

DEERFIELD BEACH, FL 33442

159

FEI Number: 65-0872279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STORCHEVOY, LEONARD ESQ STORCHEVOY, LEONARD ESQ 13899 BISCAYNE BLVD SUITE 109 13899 BISCAYNE BLVD SUITE 228 NORTH MIAMI BEACH, FL 33181 US NORTH MIAMI BEACH, FL 33181 US

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: 02/08/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SUSHKO, GALINA SUSHKO, GALINA Name: Name: 20291 NE 30TH AVENUE SUITE 115 460 LOCK ROAD #159 Address: Address:

MIAMI, FL 33180 City-St-Zip: City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VD Title: VD (X) Change () Addition () Delete WALKOWSKI, SERG WALKOWSKI, SERG Name: Name:

20291 NE 30TH AVENUE SUITE 115 460 LOCK ROAD # 159 Address: Address:

MIAMI, FL 33180 DEERFIELD BEACH, FL 33442 City-St-Zip: City-St-Zip:

() Delete Title: (X) Change () Addition Title: TD

SUSHKO, VIKTOR Name: SUSHKO, VIKTOR Name:

20291 NE 30TH AVENUE SUITE 115 Address: 460 LOCK ROAD #159 Address: City-St-Zip: MIAMI, FL 33180 City-St-Zip: DEERFIELD BEACH, FL 33442

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: GALINA PD 02/08/2005