2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P03000095071 1. Entity Name **SWEETSTEW CORPORATION**

FILED Mar 26, 2007 08:00 AM Secretary of State

Principal Place of Business

996 S WICKHAM RD WEST MELBOURNE, FL 32904



Mailing Address

996 S WICKHAM RD

WEST MELBOURNE, FL 32904



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02022007 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 51-0482670 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

SWEETING, FAITH ANN 996 S WICKHAM RD WEST MELBOURNE, FL 32904

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8. The above the obligat	named entity submits this statement for the plions of registered agent.	ourpose of changing its registere	ed office or re	egistered agent, or bi	oth, in the State of Florida. I am familiar with, and accep	pt
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Registered	d Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Slection Campaign Finan Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000677441 03/30/07-80103-020 150.00	
10. OFFICERS AND DIRECTORS					1.2.2.2.2.2	_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWEETING, FAITH ANN 4473 COQUINA RIDGE DR MELBOURNE, FL 32935				And the second of the second o	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEWART, VALERIE ANN 837 POTOMAC DR W MELBOURNE, FL 32904		. ,			•
TITLE NAME						

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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. 3 AI)

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

CITY-ST-ZIP TITLE