## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000108965

Entity Name: SWISS COMFORT, INC.

City-St-Zip: ESCAZU, CR 1250

FILED Apr 17, 2009 Secretary of State

Entity Name: SWISS COMFORT, INC.						
Current Principal Place of Business:				New Principal Place of Business:		
13615 S. DIXIE HWY. SUITE 111 MIAMI, FL 33176				9130 S. DADELAND BLVD. SUITE 1600 MIAMI, FL 33156		
Current Mailing Address:				New Mailing Address:		
13615 S. DIXIE HWY. SUITE 111 MIAMI, FL 33176			SI	9130 S. DADELAND BLVD. SUITE 1600 MIAMI, FL 33156		
FEI Number:	20-0472287	FEI Number Applied For ( )	FEI Numbe	r Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
JANN, ROMAN 13615 S DIXIE HWY, STE 111 MIAMI, FL 33176 US				GUZMAN & GUZMAN P.A 9130 S DADELAND BLVD. SUITE 1600 MIAMI, FL 33156 US		
	named entity s of Florida.	submits this statement for the p	urpose of cl	nanging its registered	office or registered agent, or both,	
SIGNATURE: ALBERTO GUZMAN				04/17/2009		
Electronic Signature of Registered Agent				Date		
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P/D () JANN, ROMAN APDO 1180 ESCAZU, CR 1	Delete	Ad	le: me: dress: y-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D/S () GARNIER, ROY APDO 10725 SAN JOSE, CR		Ad	le: me: dress: -y-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	D () CALVO CASTIL APDO 1180	Delete LO, VILMA		le: me: dress:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

City-St-Zip:

SIGNATURE: JANN ROMAN P/D 04/17/2009