

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000118864

Entity Name: SVERIGE, INC.

FILED  
Jan 18, 2005  
Secretary of State

## Current Principal Place of Business:

18495 S. DIXIE HWY  
#231  
MIAMI, FL 33157

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 972807  
MIAMI, FL 33197

## New Mailing Address:

18495 S. DIXIE HWY  
#231  
MIAMI, FL 33157

FEI Number: 20-1499810

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHIN, DENNIS J CPA  
13501 SW 128 ST  
STE. 108  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BOHBOT, MARIT  
Address: 18495 S. DIXIE HWY #231  
City-St-Zip: MIAMI, FL 33157

Title: VP ( ) Delete  
Name: BOHBOT, JACQUES  
Address: 18495 S. DIXIE HWY #231  
City-St-Zip: MIAMI, FL 33157

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MARIT BOHBOT

P

01/18/2005

Electronic Signature of Signing Officer or Director

Date