

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 02, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000157193	
1. Entity Name SWORN STATEMENT INC.	

Principal Place of Business 2502 BRIDGEWOOD LANE BOCA RATON, FL 33434	Mailing Address 2502 BRIDGEWOOD LANE BOCA RATON, FL 33434
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DO NOT WRITE IN THIS SPACE



05302006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1901979	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent NIETO, MARIA A 2502 BRIDGEWOOD LANE BOCA RATON, FL 33434	
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Maria Nieto MARIA NIETO DATE 5/30/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD NIETO, MARIA A 2502 BRIDGEWOOD LANE BOCA RATON, FL 33434
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06/02/06-80005-001 150.00

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE: Maria Nieto MARIA NIETO 5/30/06 561-452-2045
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #