2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000168277

Entity Name: SWANK GENERAL CONTRACTORS INC.

FILED Apr 11, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
1604 N.W HOMESTE	'. 1 AVE EAD, FL 33030)		
Current Mailing Address:			New Mailing Address:	
P.O. BOX HOMESTE	.1476 EAD, FL 33090)		
FEI Number	r: 20-4063913	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and	d Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:
1604 N.W	SHANNON '. 1ST AVE EAD, FL 33030	US		
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
SIGNATU	RE:			
Electronic Signature of Registered Age			ent	Date
Election Ca	mpaign Financing	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () SWANK, SHAN P.O. BOX 1467 HOMESTEAD, I		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () SWANK, LORY PO BOX 1476 HOMESTEAD, I		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S () SWANK, SALLY PO BOX 1476 HOMESTEAD, I		Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: SALLYANN SWANK D 04/11/2008