## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000009928

Entity Name: SWST, INC.

FILED Apr 07, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1600 NW 163RD ST MIAMI, FL 33169 **Current Mailing Address: New Mailing Address:** 1600 NW 163RD ST MIAMI, FL 33169 FEI Number: 20-4176307 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HERMAN, ALISON P HERMAN, ALISON P 2800 PONCE DE LEON BLVD 1600 NW 163 STREET STE 1125 MIAMI, FL 33169 CORAL GABLES, FL 33134 US 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: 04/07/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition CHAPLIN, WAYNE E CHAPLIN, WAYNE E PCD Name: Name: 1600 NW 163RD ST 1600 NW 163RD ST Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIAMI, FL 33169 Title: Title: CEOD ( ) Change (X) Addition ( ) Delete Name: Name: CHAPLIN, HARVEY R CEOD 1600 NW 163 STREET Address: Address: MIAMI, FL 33169 City-St-Zip: City-St-Zip: ( ) Change (X) Addition Title: **VPTD** Title: () Delete BECKER, STEVEN R VPTD Name: Name: 1600 NW 163 STREET Address Address: City-St-Zip: City-St-Zip: MIAMI, FL 33169 Title: () Delete Title: SVP ( ) Change (X) Addition DICK, MELVIN A SVP Name: Name: Address: Address: 1600 NW 163 STREET City-St-Zip: City-St-Zip: MIAMI, FL 33169 Title: Title: ( ) Change (X) Addition () Delete HAGER, LEE F EVPS Name: Name: Address: Address: 1600 NW 163 STREET City-St-Zip: City-St-Zip: MIAMI, FL 33169

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: STEVEN R. BECKER VPTD 04/07/2008