## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000009831

Entity Name: SWAGGER STYLES AND SOUNDS, INC.

FILED Mar 31, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

542 HIBISCUS WAY 4520 CURRY FORD ROAD ORLANDO, FL 32807 ORLANDO, FL 32812

Current Mailing Address: New Mailing Address:

542 HIBISCUS WAY
ORLANDO, FL 32807

4520 CURRY FORD ROAD
ORLANDO, FL 32812

FEI Number: 26-1902409 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:

BETANCES, CHARISSE
542 HIBISCUS WAY
ORLANDO, FL 32807 US

OCASIO, CHARISSE
4520 CURRY FORD ROAD
ORLANDO, FL 32812 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: CHARISSE OCASIO 03/31/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PV ( ) Delete Title: PV (X) Change ( ) Addition Name: OCASIO, ERIC L Name: OCASIO, ERIC L

 Name:
 OCASIO, ERIC L
 Name:
 OCASIO, ERIC L

 Address:
 542 HIBISCUS WAY
 Address:
 4520 CURRY FORD ROAD

Address: 542 HIBISCUS WAY Address: 4520 CORRY FORD ROAD City-St-Zip: ORLANDO, FL 32807 City-St-Zip: ORLANDO, FL 32812

Title: ST ( ) Delete Title: ST (X) Change ( ) Addition

Name:BETANCES, CHARISSEName:OCASIO, CHARISSEAddress:542 HIBISCUS WAYAddress:4520 CURRY FORD ROADCity-St-Zip:ORLANDO, FL 32807City-St-Zip:ORLANDO, FL 32812

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: CHARISSE OCASIO S 03/31/2009