

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000011078

Entity Name: SMW TECHNOLOGIES INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

2550 KIRBY AVE. NE
UNIT 205
PALM BAY, FL 32905

New Principal Place of Business:

Current Mailing Address:

2550 KIRBY AVE. NE
UNIT 205
PALM BAY, FL 32905

New Mailing Address:

271 KNICKERBOCKER AVE
BOHEMIA, NY 11716 US

FEI Number: 83-0505364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRISAFULLI, JOAN
2550 KIRBY AVE. NE
UNIT 205
PALM BAY, FL 32905 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: PD () Delete
Name: CRISAFULLI, RAYMOND
Address: 1 KATE CT.
City-St-Zip: PORT JEFFERSON, NY 11777

Title: VD () Delete
Name: CRISAFULLI, JOAN
Address: 1 KATE CT.
City-St-Zip: PORT JEFFERSON, NY 11777

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 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: RAYMOND CRISAFULLI

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

Date