FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P93000032852 (4)

SWEDEIRE, INC.

Principal Place of Business	Mailing Address	1 10811981 110 19189 11111 00111 PB
545 WATERMARK ST. #308 DANIA FL 33004	545 WATERMARK ST. #306 Dania Fl 33004	DO NOT WE
		 Date Incorporated or Qualifity 05/03/1993
2. Principal Place of Business	2a. Mailing Address	4. FEI Number

FILED May 06 1998 8:00am Secretary of State

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#306	AAR SI.	#306					
DANIA FL 33004		DANIA FL 33004	=		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					05/03/1993		
	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21	#	Suite, Apt. #, etc.			65-0408507	Not Applicable	
Suite, Apt.	₩, Θ ΙC.	27. Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State)	City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Ζφ	Country		8. This corporation owes or has paid the d		
24	25	29	30		Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Cui	rent Registered Agent	81	Name	10. Name and Address of New Registers	a Agent	
	R GLJ UNG, PATRICIA R		°'	Mairie			
	WATERMARK ST.		82	82 Street Address (P.O. Box Number is Not Acceptable)			
#3	• •		83				
DA	NIA FL 33004		63				
			84	City	F	85 Zip Code	
dd Dissipant	a the are delene of Continue 607	0000 and 007 1609. Elorida Sta	tutos the above	named cor			
office or re agent. I ar	o the provisions of Sections 407. egistered agent, or both, in the Similar with, and accept the of	late of Florida. Such change wa oligations of, Section 607.0505,	as authorized by Florida Statutes	the corpora	poration submits this statement for the purpose tilon's board of directors. I hereby accept the a	ippointment as registered	
SIGNATURE		·					
12.	Signature, typed or printed name of registered	AND DIRECTORS	NOTE: Registered Age	nt signature requ	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D	DELETE	1 1 TITLE		ADDITIONS/GRIANGED TO OFFICERS A	Change Addition	
NAME	BERGLJUNG, PATRICIA R		1.2 NAME	j		_ , _	
STREET ADDRESS	545 WATERMARK ST., #3	06	1.3 STREET	ADDRESS			
CITY-ST-ZIP	DANIA FL 33004		1.4 CITY - S				
TITLE		DELETE	2.1 TITLE	<u> </u>		Change Addition	
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREFT	ADDRESS			
CITY+\$T-ZIP			2. 4 CITY - 9	ST-ZIP			
TITLE		☐ DELETE	3 1 TITLE			☐ Change ☐ Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CHY- S	ST - ZIP			
TITLE		DELETE	4.1 TITLE	i		☐ Change ☐ Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY - S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP	_ _		5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-S	T-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attrichment with an address.