

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF REVENUE
Charles B. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 APR -3 AM 9:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P.93000040234

1. Corporation Name
**E.S.W. Corporation
formerly Constant-Bau, Inc.**

Principal Place of Business Mailing Address
**140 El Dorado Pkwy S.W.
Cape Coral, FL 33914**

**700001448797
-04/06/95--01019--002
****200.00 ****200.00**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 1318 Lafayette Street		26 Same		06-01-93		04-1994	
Suite, Apt. #, etc		Suite, Apt. #, etc		4. FEI Number		Applied For	
22 c/o Thomas W Hill		27		65-0555934		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
23 Cape Coral, FL		28		6. Election Campaign Financing		☐ \$5.00 May Be Added to Fees	
Zip		Country		Trust Fund Contribution		☐	
24 33904		25 Lee		29		30	
29		30		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Christel Shultz 140 Eldorado Parkway SW Cape Coral, FL 33914		81 Name Thomas W Hill	
		82 Street Address (P.O. Box Number is Not Acceptable) 1318 Lafayette Street	
		83	
		84 City cape coral	
		FL 85 33904	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Thomas W Hill* 3/24/95
Signature, typed or printed name of registered agent (if change of agent)
(NOTE: Registered Agent signature required when filing change)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P.D.	1.1 TITLE	P.D. ☐ Change ☐ Addition
NAME	Ernst Sauerwein	1.2 NAME	Ernst Sauerwein
STREET ADDRESS	140 El dorado Pkwy S.W.	1.3 STREET ADDRESS	1318 Lafayette St
CITY, ST, ZIP	Cape Coral, FL 33914	1.4 CITY, ST, ZIP	Cape Coral, FL 33904
TITLE	S.T.D.	2.1 TITLE	S.T.D. ☐ Change ☐ Addition
NAME	Thomas W. Hill	2.2 NAME	Thomas W. Hill
STREET ADDRESS	1318 Lafayette St.	2.3 STREET ADDRESS	1318 Lafayette St.
CITY, ST, ZIP	Cape Coral, FL 33904	2.4 CITY, ST, ZIP	Cape Coral, FL 33904
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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. 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 on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Thomas W Hill*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/95
RW 4-3-95