2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2008
Secretary of State

DOCUMENT# P93000049334

Entity Name: EQWS INTERNATIONAL CORP.

Current Principal Place of Business:

100 WESTWARD DRIVE
C
MIAMI SPRINGS, FL 33166 US

New Principal Place of Business:

Current Mailing Address:

100 WESTWARD DRIVE
C
MIAMI SPRINGS, FL 33166 US

New Mailing Address:

FEI Number: 65-0423610 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOLFF, ROBERTO
2555 COLLINS AVE.
APT 2408
MIAMI BEACH, FL 33140 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: PTD ( ) Delete
Name: WOLFF, ROBERTO
Address: 2555 COLLINS AVE. #2408
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: SD ( ) Delete
Name: WOLFF, ELIANA R
Address: 2555 COLLINS AVE. #2408
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: D ( ) Delete
Name: SAAVEDRA, ELSA
Address: 529 CURTISS PKWY
City-St-Zip: MIAMI SPRINGS, FL 33166 US

Title: VPD ( ) Delete
Name: SAAVEDRA, ALDO
Address: 529 CURTISS PKWY
City-St-Zip: MIAMI SPRINGS, FL 33166 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ROBERTO WOLFF PTD 03/06/2008

Electronic Signature of Signing Officer or Director Date