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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000075499 (2)

SWS ENGINEERS, INC.

Principa	Place	of	Buşiness

Mailing Address

FILED Apr 28 1997 8:00am Secretary of State



536 JUNIPER PLACE W PALM BEACH FL		536 JUNIPER PLACE W PALM BEACH FL 33414-8165									
					3. Date Incorporated or Qualified 11/02/1993 3a. Date of Last Report 05/01/1996						
2. Principal Place o	f Business	2a. Mailing Address 26				4. FEI Number 65-0453045		_	Applied F		
Suite, Apt #, etc		Suite, Apt. #, etc.	<u> </u>			5. Certificate of Status Desired			75 Addition e Required		
City & State	City & State City & State					6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees			
Zip 24	Country 25	Zip 29	Zip Country 8. This corporation has liability for intangible tax under s.							32,	
9.	Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered /	gent			
WEISS, T			. [81	Name	·					
536 JUNIPER PLACE W PALM BEACH FL 33414				82	Street Addr	ddress (P.O. Box Number is Not Acceptable)					
			Į.	83							
			ĺ	64	City		FL	85	Zip Code		
11. Pursuant to the	provisions of Sections 607.056	02 and 607.1508, Florida Sta	atutes, the ab	ove	-named corp	poration submits this statement for the p	urpose of	changi	ing its regist	lered	
office or registe agent. I am fan	red agent, or both, in the State illiar with, and accept the oblig	e of Florida. Such change w pations of, Section 607.0505	as authorized , Florida Statu	l by ites	the corporal	tion's board of directors. I hereby accept	ot the app	ointmer	nt as registe	red	
SIGNATURE:											
Signata	re, typod or printed name of registered ag			Ager	nt signature requi	red when reinstating)	DATE	DIDEO	7050 W. 40		
12. THE D	OFFICERS AN	ID DIRECTORS	13.	F	Т	ADDITIONS/CHANGES TO OFFIC	ERS AND	Cha		ddition	
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	3 JUNIPER PLACE				ADDRESS						
	PALM BEACH FL 33414		1.4 CiT								
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14. I do 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 bustee 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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OB PAINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/97 (961) 795-6579.