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 # P94000018915 (6)

SWISSCO FINANCE INC.

Principal Place of Business

12433 66TH ST. N. LARGO FL 34643 Mailing Address

12433 66TH ST. N.

FILED May 20 1997 8:00am Secretary of State



LARGO FL 34843 LARGO FL 33773-3438						
					3. Date Incorporated or Qualified 03/10/1994	3a. Date of Last Report 03/19/1996
2. Principal P	lace of Business	2a. Mailing Address	(17)	٠. لاح	4. FEI Number	Applied For
21 [700	feel to say Sik	(26 /100 feelf	toka	en AW	59-3229858	Not Applicable
Sulte, Apt.	Metc. O	Suite, Apt #, ac. /	(5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Clas Water 28 Clas Wa			les-		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip. 746	16 25 Country	29 346/S 3	Country			Yes No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	platered Agent
HONEGGER, ARTHUR 11310 REGAL LANE				Name		
				82 Street Address (P.O. Box Number is Not Acceptable)		
LARGO FL 34644			[-			
_			83			
			84	City		El 85 Zip Code
44 5	the annual continue cor of Con	and 607 1509 Elevida Ctatutas	the phove	named corpo	ration submits this statement for the n	• • i
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	Signature, typed or printed name of registered agen	and little if applicable (NOTE, F	ea stered Age	n: signature required	when revistat-no)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	PO	☐ DEL€TE	1 1 TITLE			Change Addition
NAME	HONEGGER, ARTHUR		1.2 NAME	į		
STREET ADDRESS	12433 66TH ST N		1.3 STREET	ADDRESS		
CITY-ST-ZIP	LARGO FL		1.4 CITY - S	1 - 21P		
TITLE	1	DELETE	2 1 TITLE			Change Addition
NAME	HONEGGER, MARLIS		2.2 NAME			
STREET ADDRESS	12433 N 66TH ST	•	2.3 STREET	ADDRESS		
CITY-ST-ZIP	LARGO FL		2. 4 CITY - ST- ZIP			
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		•
CITY-ST-ZIP			3.4. Cl1Y - S	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY-S	T - 71P		
TITLE		☐ DELETE	51 TITLE	1		☐ Change ☐ Addition
NAME			52 NAME			C[10
STREET ADDRESS			53 STREET	ADDRESS		W >1
CITY-ST-ZIP			5 4 CITY-S	T-ZIP		· \
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME		90000220	0769
STREET ADDRESS	1		6.3 STREET	ADDRESS	-06/04/970100	9008
CITY-ST-ZIP			6.4 CITY-S		***495_00	
14 I do boro	by partify that the information appoint	with this films does not sublify	for the eve	motion stated	in Section 110 07/3)/iii Florida Statules	I further certify that the

I do hereby certify that the information supplied with this filling doos not quality for the exemption stated in Section 119.07(3)(i). Floridad 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 of 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 changes, and attachment with an address.

4-79-97 00-1415-957