

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
**1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 FEB 28 PM 3:58

**DOCUMENT # P94000061837 (8)**

1. Corporation Name

**SWDGP, INC.**

Principal Place of Business

**2021 TYLER ST.  
HOLLYWOOD FL 33020**

Mailing Address

**2021 TYLER ST.  
HOLLYWOOD FL 33020**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

3a. Date of Last Report

**08/22/1994**

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

**21 1921 S. W. 74 Terrace**

2a. Mailing Address

**26 1921 S.W. 74th Terr.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

**23 Plantation, FL**

**28 Plantation, FL**

Zip

Country

Zip

Country

**24 33317**

**25 USA**

**29 33317**

**30 USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WEISMAN, DAVID  
2021 TYLER ST.  
HOLLYWOOD FL 33020**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

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 of Registered Agent and the Corporation)

(Signature of Registered Agent - signature required when recording)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP  
**DP  
ANTONUCCI, LOUIS J  
2021 TYLER ST.  
HOLLYWOOD FL 33020**

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY ST ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP  
**DV  
WESSMAN, JENNE L  
2021 TYLER ST.  
HOLLYWOOD FL 33020**

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY ST ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP  
**DV  
ANTONUCCI, JAMES F  
2021 TYLER ST.  
HOLLYWOOD FL 33020**

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY ST ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP  
**DS  
ANTONUCCI, JOSEPH S  
2021 TYLER ST.  
HOLLYWOOD FL 33020**

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY ST ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY ST ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY ST ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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 907, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Louis J. Antonucci* **LOUIS J. ANTONUCCI** 1-18-95 305-799-0103

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Typed Name)