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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT # **P94000061837 (8)**

SWDGP, INC.

FILED

Jan 27 1997 8:00am

Secretary of State

Principal Place of Business Mailing Address 1921 S.W. 74TH TERRACE 1921 S.W. 74TH TERRACE PLANTATION FL 33317 PLANTATION FL 33317-4935 US US					enter	3. Date Incorporated or Qualified 3s. Date of Last Report				
_						08/22/1994	02/	13/199	6	
	Place of Business	2a. Mailing Address	a. Mailing Address			4. FEI Number			Applied For	r
21		26				65-0531645			Not Applica	
Suite, Apr 22		Suite, Apt. #, etc. 27			· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	Fee Required			
City & Sto	ite	City & State				6. Election Campaign Financing	<u></u>		00 May Be	
23	Country		Zip Country			Trust Fund Contribution Added to Fees				
Zip 24	<u>├</u> ─┐	Zip	30	пшу		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			<u>2,</u>	
24	25 25 Name and Address of Curren	29 nt Registered Agent				10. Name and Address of New Re				
WE	ISMAN, DAVID			81	Name				·/== /=-	
	21 TYLER ST.				0:	/D O D N - 1 - 1 - 1 - 1 - 1	1-1		 	
	LLYWOOD FL 33020			82	Street Add	ress (P.O. Box Number is Not Acceptat	He)			
				83						_
				84	City			85 2	Zip Code	·
					,	poration submits this statement for the ptition's board of directors. I hereby accept	FL	.	•	
12.		OFFICERS AND DIRECTORS		13.		Ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND			dition
TITLE	OP	☐ DELETE	1.1 T					Chan	nge 🔲 Add	lition
NAME	ANTONUCCI, LOUIS J 2021 TYLER ST.		1.2 N/							
STREET ADDRESS	HOLLYWOOD FL 33020				ADDRESS					
CITY - S1 - ZIF	DV	DELETE	211		ST-ZIP			☐ Chan	ige 🔲 Add	dition
NAME	WESSMAN, JENNIE L		22 N		1					
STREET ADDRESS	AAAA SIN ED AT		2.3 S1	REET	ADDRESS					
CITY-ST-7IP	HOLLYWOOD FL 33020		2.40	17Y- S	ST-ZIP					
TITLE	DV	DELETE	3.1 Tr	TLE				Chan	nge 🔲 Add	lition
NAME	ANTONUCCI, JAMES F		3.2 N/	AME						
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP	HOLLYWOOD FL 33020	Process			ST-ZIP			1 05	- FTA:-	4141
TITLE	DS ANTONIUCCI IOCEDII C	☐ DELETE	4.1 11					L Chan	nge 🗀 Add	поин
NAME OFFICE APPRICACE	ANTONUCCI, JOSEPH S 2021 TYLER ST.		4. 2 N		1					
STREET ADDRESS	HOLLYWOOD FL 33020				ADDRESS			•		
CITY-ST-7IP TITLE	IIVETTIONS IF AART	DELETE	5.1 TI		ST-ZIP		····	Chan	nge Add	dition
NAME			52 N							
STREET ADDRESS			1		r address					
CITY ST-ZIP			- 1		ST-ZIP	_				
TITLE		DELETE		6.1 TITLE				☐ Chan	nge 🔲 Add	lition
NAME			6.2 N	AME						
STREET ADDRESS			6.3 \$1	TREET	ADDRESS					
CITY - ST - ZIP			6.4 CI	TY-S	ST-ZIP					

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

OVIS J ANTONVICCI PRES.