## **2001 UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # P95000006933

1. Entity Name

SWISS WATCH INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

## FILED Apr 16, 2001 8:00 am Secretary of State 04-16-2001 90014 008 \*\*\*150.00

101 S. STATE ROAD 7 SUITE 201 HOLLYWOOD FL 33023-6736 US		101 S. STATE ROAD 7 SUITE 201 HOLLYWOOD FL 33023-6736 US				641942				
2. Principal Place of Business		3. Mailing Address							<b>11</b> 1111 1111	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State		City & State			4.	ho-upantitud			plied For t Applicable	
Zip	Country	Zip	Country		5.	Certificate of Status Desire		8.75 Add	litional	
6. Name and Address of Current Registered Agent					7. 1	Name and Address of Ne	w Registered Ac	jent		
				Name						
BEN-SHMUEL, LIOR 101 S. STATE ROAD 7, SUITE 2				Street Address (P.O. Box Number is Not Acceptable)						
2ND							•			
	LYWOOD FL 33023		City				FL	Zip Code	9	
8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE										
			-			-				
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta				10. Election Campaigr Trust Fund Contrib		<b>\$5.0</b> Added	May Be to Fees	
11.	OFFICERS AND D	DIRECTORS	12.		AC	DITIONS/CHANGES TO	OFFICERS AND D	DIRECTORS	3 IN 11	
TITLE	Р	☐ Delete	TITLE					Change	☐ Addition 3	
NAME	BEN-SHMUEL, LIOR		NAM	E						
STREET ADDRESS	101 S. STATE ROAD 7, SUITE 2			ET ADDRESS		,			] ;	
CITY-ST-ZIP	HOLLYWOOD FL 33023		_	-ST-ZIP						
TITLE	VP	☐ Delete	TITLE	<b>I</b>		:		Change	Addition ]	
NAME STREET ADDRESS	BEN-SHMUEL, ELIAHU		NAM	ET ADDRESS						
CITY-ST-ZIP	101 S. STATE ROAD 7, SUITE 2 HOLLYWOOD FL 33023			-ST-ZIP						
	-	Delete	. TITLE	: .				- Change -	Addition	
_TITLE NAME	BEN-SCHMUEL, IZAC	م _ الروايد   المساور الروايد   الروايد	NAM	- 1 -			- •		_	
STREET ADDRESS	101 S. STATE ROAD 7, SUITE 2		STRE	ET ADDRESS						
CITY-ST-ZIP	HOLLYWOOD FL 33023		CITY	-ST-ZIP						
TITLE	S	☐ Delete	TITLE				1	Change	☐ Addition	
NAME	BEN-SCHMUEL, SHLOMI		NAM	E		ı			,	
STREET ADDRESS	101 S. STATE ROAD 7, SUITE 2			ET ADDRESS						
CITY-ST-ZIP	HOLLYWOOD FL 33023		CITY	-ST-ZIP				<u></u>		
TITLE		☐ Delete	TITLE			ı	!	Change	Addition	
NAME CARECT ADDRESS			NAM	ET ADDRESS		ĺ			Į	
STREET ADDRESS CITY-ST-ZIP	· 25.			-ST-ZIP						
		□ R-1-1-	TITLE					Change	Addition	
TITLE Name		☐ Delete	NAMI			l	Ļ	onange	Audition	
STREET ADDRESS		- 6-3-1 °.		- et address		!				
CITY-ST-ZIP	that it is the market	The same of the sa		-ST-ZIP		: 				
13. I hereby of	certify that the information supplied with t	this filing does not qualify for	the exer	mption stated	in Section	119.07(3)(i), Florida Statut	es. I further certif	y that the in	formation 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF

ING OFFICER OR DIRECTOR