


FILED
Jan 29, 2007 08:00 AM
Secretary of State

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P95000036973 1. Entity Name SMW MANUFACTURING, LTD., INC.	
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Principal Place of Business 2550 KIRBY AVENUE SUITE 205 PALM BAY, FL 32905 US	Mailing Address 2550 KIRBY AVENUE SUITE 205 PALM BAY, FL 32905 US
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DO NOT WRITE IN THIS SPACE



01182007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3313332	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROOTH, SUSAN A
7913 SEMINOLE MALL EAST
SEMINOLE, FL 34642

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHN H. COBB 21 DRAKE ST EATONS NECK, NY 11768
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DIANE COBB 21 DRAKE ST EATONS NECK, NY 11768
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01/31/07-80026-025 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 appears in Block 10 or Block 11 if chairman, or on an attachment with an address, with all other like empowered

SIGNATURE: *[Signature]* **President** 1/18/07

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR