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FILED

Jan 16 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000051036 (8)

1. Corporation Name  
SWENI INTERNATIONAL, INC.

Principal Place of Business  
4520 WEST EAU GALLIE BLVD.  
MELBOURNE FL 32934

Mailing Address  
4520 WEST EAU GALLIE BLVD.  
MELBOURNE FL 32934-7216

3. Date Incorporated or Qualified  
06/30/1995

3a. Date of Last Report  
05/14/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number  
NOT APPLICABLE 59-3328937

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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

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

9. Name and Address of Current Registered Agent

SOILEAU, JOHN L  
1970 MICHIGAN AVE.  
BLDG. C  
COCOA FL 32922

10. Name and Address of New Registered Agent

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 607.1503, 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 agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
GANDHI, PRATIBHA  
4520 WEST EAU GALLIE BLVD.  
MELBOURNE FL 32934

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
GANDHI, HEMANT  
4520 WEST EAU GALLIE BLVD.  
MELBOURNE FL 32934

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
PATEL, USHA B  
4520 WEST EAU GALLIE BLVD.  
MELBOURNE FL 32934

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
PATEL, BACHU  
4520 WEST EAU GALLIE BLVD.  
MELBOURNE FL 32934

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
PATEL, BACHU  
4520 WEST EAU GALLIE BLVD.  
MELBOURNE FL 32934

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
PATEL, BACHU  
4520 WEST EAU GALLIE BLVD.  
MELBOURNE FL 32934

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ Addition

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

P. Gandhi

1.7.97

407-259-8400

CR2E034 (9/96)