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PROFIT CORPORATION ANNUAL REPORT



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

1996 DIVISION OF CORPORATIONS DOCUMENT # P95000097702 (1)					.			
SW 20	, INC.				:			
Principal Place	e of Business	Mailing Address						
288-Z SMITH SANDY ROAD DELRAY BEACH FL 33446		288-Z SMITH SANDY ROAD DELRAY BEACH FL 33446						
					3. Date Incorporated or Qualified	3a. Dat	e of Last R	eport
Dringing D	lace of Business				12/28/1995			
: Principal P	lace of Business	2a. Mailing Address 26			4. FEI Number 65 06 395	na		Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						Not Applicable Additional
<u></u>		27			5. Certificate of Status Desired			Required
City & Stat	6	City & State			6. Election Campaign Financing		\$5.0	0 мау Ве
1	Country	28	Country		Trust Fund Contribution			d to Fees
]	25	29	30	,	8. This corporation has liability fo	r intangible t s No	ax under s	199.032,
	9. Name and Address of Co				10. Name and Address of New		Agent	***************************************
			81	Name				
MOMBACH, GEOFFREY S			82 Street Ac		Iress (P.O. Box Number is Not Acceptable)			
	ST BROWARD BLVD.		-					
SUITE 1			83					
FI. LAU	DERDALE FL 33394		84	City			85 Zg	o Code
				1 ′		- 1		
Pursuant or register	to the provisions of Sections 607, red agent, or both, in the State of	0502 and 607.1508, Florida Statute Florida Such change was authorize	is, the above i	1	ration submits this statement for the pr	FL propose of characters as	anging its r	egistered offic
Pursuant or register familiar wi	to the provisions of Sections 607, red agent, or both, in the State of ith, and accept the obligations of,	0502 and 607.1508, Florida Statute Florida Such change was authorize Section 607.0505, Florida Statutes.	s, the above i	1	ration submits this statement for the pi rd of directors. Thereby accept the api		anging its r registered	egistered offici agent, flam
				named corpor loration's book		urpose of ch pointment as	anging its r registered	egistered offic agent, flam
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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 granged, or on an assemblent with anaddless.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1118/96

496-1280 Dayane Prove CR2E034 (12/95)