## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachme

SIGNATURE:

## Mar 24, 2008 08:00 A **Secretary of State** DOCUMENT # P96000045623 SWEDISH MOTORCARS, INC. Principal Place of Business Mailing Address **6014A E HILLSBOROUGH AVE 6014A E HILLSBOROUGH AVE** TAMPA, FL 33610 TAMPA, FL 33610 03032008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3384234 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ACEVEDO, JOSE A DO NOT WRITE 6014A E HILLSBOROUGH AVE TAMPA, FL 33610 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. ! Added to Fees OFFICERS AND DIRECTORS 10. U00000867087 04/08/08-80056-003 150.00 THILE NAME ACEVEDO, JOSE A 6014A E HILLSBOROUGH AVE STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33610** TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE : NAME 1: STREET ADDRESS CITY-ST-ZIP supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information length 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 pushes exprowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information indicated on this report or suppler of the corporation or the receiver of

ill other like empowered.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Daytima Phone #

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