Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90005 013 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9800004074

STREET ADDRESS

SWAMI'S	S TRADING 98 INCORPORAT	red									
Principal Place	of Business	Mailing Ad	ddress							// 10 10 10 10 10 10 10 1	BBIT BIBI IBBI
772 NW 183RD STREET 772 NW 183RD STREET MIAMI GARDENS FL 33169 MIAMI GARDENS FL 33169								DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qualifed	*		
								01/12/1998			
2. Principal Pl	ace of Business	2a. Mailing	g Address					4. FEI Number 65 08 191	28_) 	plied For t Applicable
Suite, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.					5. Certifcate of Status Desired		\$8.75 A Fee Re	
City & State	9	City &	City & State					6. Election Campaign Financing		\$5.00	
23	, , ,	28						Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	~_· _	_ Coun	itry-			8. This corporation owes the curr			□No
24	25	29		30				Personal Property Tax. 10. Name and Address of New F			
	9. Name and Address of Current	Registered A	Ngent		81	Name		10, Name and Address of New A	registered F	gont	
AR I	OON, ROOPCHAN			Ľ	<u>.</u>						
1980 NE 173RD STREET				82 Street Address (P.			ss (P.O. Box Number is Not Accepta	ible)			
NORTH MIAMI BEACH FL 33162				<u> </u>	83				· -		
				L	\Box					122 75 6	
					84	City			FL	85 Zip C	ode
agent. I a SIGNATURE	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati Signature, typed or printed name of registered agent	end title if applicable	la. (NOTE: F	Registered A	ies.	•		when reinstating) ADDITIONS/CHANGES TO OF	DATE		
12.	OFFICERS AND DIRECTORS Delete			-	13. 1,1 TITLE			ADDITIONS/CHANGES TO OF	FICERS ANI	Change	Addition
TITLE	PD									_ '	_
NAME CODECT ADDRESS	Arjoon, Roopchan 1980 ne 173rd Street				1.2 NAME 1.3 STREET ADDRESS						Ì
STREET ADDRESS CITY-ST-ZIP	NORTH MIAMI BEACH FL 33162				1.4 CITY+ST-ZIP						
TITLE	SD DELETE		_	2.1 TITLE					☐ Change	☐ Addition	
NAME				22 NA	22 NAME						
STREET ADDRESS	THE PROPERTY OF THE PARTY OF TH			2.3 STF	2.3 STREET ADDRESS						
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33162			2. 4 CITY-ST-ZIP							
TITLE	☐ DELETE			3.1 TITI	3.1 TITLE					☐ Change	Addition
NAME				3.2 NA	ME						
STREET ADDRESS				3.3 STF	3.3 STREET ADDRESS						
CITY-ST-ZIP					3.4. CITY-ST-ZIP					☐ Change	Addition
TITLE	☐ DELETE				4.1 TITLE					☐ Change	L Addition
NAME				4. 2 NA							
STREET ADDRESS	_					ADDRESS					Ì
CITY-ST-ZIP			DELETE	4.4 CIT		T-ZIP	+			Change	Addition
TITLE			C) DECETE	5.1 NA							
NAME						TADDRESS					
STREET ADDRESS				5.4 CIT							
CITY-ST-ZIP	***************************************		DELETE	6.1 TITI			t			Change	☐ Addition
NAME				6.2 NA	ME		ļ				
PERSONAL ADDRESS				6.3 STE	REET	ADORESS	1				

14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP

305-651-9252