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 # P98000087692

1. Corporation Name

SWAN WORLD, INC.

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90043 018 ***150.00



Principal Place of Business Mailing Address) (\$\$1(\$\$1 is see iant and and and and and and and and and				
5941 S.W. 88TH STREET 5941 S.W. 88TH STREET MIAMI FL 33156 MIAMI FL 33156						
minmail L 00100				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed		
				10/05/1998		
2. Principal P	lace of Business	2a. Mailing Address	00 0-	A FEI Number	Apr	olied For
21 <i>5941</i>	SW 88 ST	26 5941 SW	88 ST	65-0872664	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8. 75-∧	dditional –
22		27		5. Certificate of Status Desired	Fee Red	quired
City & State City & State				6. Election Campaign Financing	\$5.00	May Be
23 MIAMI FL 28 MIAM		28 M/AM) F	-	Trust Fund Contribution	Added to	Fees
Zip	Country	Zip C	Country	8. This corporation owes the current year Int	angible	
24 33/5	56 25 USA	29 35/56 30	454	Personal Property Tax.	☐ Yes	No.
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered	Agent	
			INIE S. FONT			
FON	it, miguel		81 Name 82 Street Ad	dress (P.O. Boy Number is Not Acceptable)		
5941	I S.W. 88TH STREET		594	dress (P.O. Box Number is Not Acceptable)	_	
MIAN	MI FL 33156		83	1) = (1) (1) (1)		
			84 City //	<i>IAMI. FC</i> FL	85 Zig 2	356
44 8	- H	2 J 607 1509 Florido Statutos th		rporation submits this statement for the purpose of	changing its	registered
l office or n	enistered agent, or both, in the State (of Florida. Such change was authori:	zed by the corpora	tion's board of directors. I hereby accept the appoint	ntment as rec	istered
agent. I a	im familiar with and accept the obligat	ions of, Section 607.0505, Florida S	tatutes.	. 2.4	5.00	
SIGNATURE	//minst	Tout ME	810ENT	2-3	7-77	
ļ	Signature typed or printed name of registered agen		ered Agent signature requ		ID DIRECTO	DS IN 12
12.	, <u>.</u>		13.	ADDITIONS/CHANGES TO OFFICERS AN	☐ Change	Addition
TITLE	0		1 TITLE		ري حاسانون	
NAME	FONT, ANNIE	1	2 NAME			
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CITY-ST-ZIP	MIAMI-FL 33156		4 CITY-ST-ZIP		C	- مانالداد (۱۳۰۱
TITLE	D	DELETE 2	1TITLE		Change	- Addition
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CITY-ST-ZIP	MIAMI FL 33155	2	. 4 CiTY-ST-ZIP	<u> </u>		
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NAME		3	2 NAME			
STREET ADDRESS			3 STREET ADDRESS			
CITY-ST-ZIP			.4. CITY-ST-ZIP .1 TITLE		☐ Change	Addition
TITLE						
NAME			2 NAME			
STREET ADDRESS			3 STREET ADDRESS			
CITY-ST-ZIP			4 CITY-ST-ZIP			□ \$4400-
TITLE	1		.1 TITLE		Change	Addition
NAME			2 NAME			
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CITY-ST-ZIP		5	4 CITY+ST-ZIP	All the second of the second		** .* ,
TITLE		☐ DELETE 6	.1 TITLE	Santa beres de la Caracteria	☐ Change	Addition
NAME		6	2 NAME			, ,
STREET ADDRESS		6	.3 STREET ADDRESS			
			.4 CITY-ST-ZIP			
CITY-ST-ZIP	i	0.	A OUT TO USE			

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.

SIGNATURE:

CITY-ST-ZIP