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 # P98000104740 1. Corporation Name

SWISSILKS, INC.

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90102 041 ***150.00



Principal Place	of Business	Mailing Addres	S							
7801 S.E. CANAAN WAY 7801 S.E. CANAAN WA										
JUPITER FL 3345	98	JUPITER FL 3345	JUPITER PL 33436			DO NOT WRITE IN THIS SPACE				
						3. Date ir corpor	ated or Qualifed			
						12/17/1998				ļ
2. Principa P	ace of Business	2a. Mailing Add	iress			4. FEI Number_			App	ied For
21		26				165C	S81880	88C) -		Applicable
Suite, Apt.	#. etc.	Suite, Apt. :	#, etc.						\$8.75 A	Iditional
22	.,	27				5. Certificate of S	itatus Desired		Fee Req	
City & State	e	City & State	e			6. Election Camp	paign Financing		\$5.00 h	1ay Be
23		28				Trust Fund Co	ontribution		Added to	Fees
Zip	Country	Zip		Country		8. This corporati	on owes the curre	ent year Intanç	jible	
24	25	29	30	5		Personal Prop	erty Tax.		Yes []No
	9. Name and Address of Cur	rent Registered Agent	1			10. Name and A	Idress of New R	egistered Ag	ent	
	OWEAD DAMO			81	Name					
	NEY, WARD, LESHER & DAMO	JN, P.A.		82	Street Ac	dress (P.O. Box Numb	er is Not Accepta	ble)		
4420 BEACON CIRCLE, SUITE 100				"	Quide: Ac	arcos (r.o. box riamo	5. 15 (16) (16) (16)	,		
WEST	PALM BEACH FL 33407			83						
				-					or Zin C	.do
				84	City			FL	85 Zip C	, de
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Flo	rida Statutes,	the above	e-named cc	rporation submits this s	tatement for the p	purpose of cha	anging its r	egistered
office or n	egistered agent, or bo h, in the Start familiar with, and accept the object.	ate of Florida, Such cha	nge was auth '.0505, Florida	norized by a Statutes	the corpora	tion's board of cirector	s. I hereby accept	t the appointm	ent as reg	sterea
	The same of the same of the same of			and	- **	Danson !	Apr	ul (S.	1994	ት
SIGNATURE	Clanature, typed or printed a ne of registered	agent and title if applicable.				ired when reinstating)	/ \	DATE		
12.		AND DIRECTORS		13.		ADDITIONS/CI	HANGES TO OFF			
TITLE	Pres Directo	√ □	DELETE	1.1 TITLE					_ Change	☐ Addition
NAME	MAROL DAN			1.2 NAME						
STREET ADDRESS	TROI SE-COM	. ^ 4	/	1.3 STREET	FADDRESS					
CITY-ST-ZIP	Juniley F	L 3345	3	1.4 CITY-S	T-ZIP					
TITLE			DELETE	2.1 TITLE					Change	Addition
NAME				2.2 NAME						
STREET ADDRESS				2.3 STREE	ADDRESS					
CITY-ST-ZIP				2. 4 CITY- 9	T- ZIP					
TITLE	Secritions (1)		DELETE	3.1 TITLE					Change	☐ Addition
NAME	CONPRAD DA	more)		3.2 NAME						
STREET ADDRESS	Deal Con	man Way		3 3 STREET	ADDRESS					
CITY-ST-ZIP	L'ALEX	2 34		3.4. CITY- S	T-ZIP					
TITLE	and the same		DELETE	4.1 TITLE					Change	Addition
NAME				4. 2 NAME						

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I heret y 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 changes, or of an attact ment with an address, with all other like empowered.

4.3 STREET ADDRESS

5 3 STREET ADDRESS

6 3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

Daytime Phone #

☐ Change

Change

☐ Addition

Addition