2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 24, 2004 08:00 AM **DOCUMENT # P99000064465** Secretary of State 1. Entity Name SWIG, INC. Principal Place of Business Mailing Address 115 GRANADA COURT 115 GRANADA COURT ORLANDO, FL 32803 ORLANDO, FL 32803 CR2E034 (10/03) 01152004 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3589123 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SAUTTER, C. CHRISTIAN ESQ. DO NOT WRITE 2900 E. OAKLAND PARK BLVD. SUITE 200 IN THIS SPACE FORT LAUDERDALE, FL 33306 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) \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 10. nn e SMOTHERMAN, J. SCOT NAME 615 CHEROKEE CIRCLE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32801 TITLE NAME WILSON, JAMES U00000012680 STREET ADDRESS 164 S. TESSIER DRIVE 01/26/04-80019-025 150.00 CITY-ST-ZIP ST. PETERSBURG BEACH, FL 33706 TITLE NAME INGERTO, SCOTT STREET ADDRESS **7 SARANAC ROAD** DO NOT WRITE CITY-ST-ZIP FORT LAUDERDALE, FL 33308 TITLE IN THIS SPACE NAM# GUITIERREZ, JOHN STREET ADDRESS 5767 SW 89TH LANE CITY-ST-ZIP COOPER CITY, FL 33328 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: