

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 21, 2003 8:00 am**  
**Secretary of State**

01-21-2003 90497 002 \*\*\*150.00

DOCUMENT # P99000065797

1. Entity Name  
SWAMPTEK CORPORATION



Principal Place of Business  
17994 S. W. 97 AVE  
SUITE 101  
MIAMI FL 33157

Mailing Address  
17994 S. W. 97 AVE  
SUITE 101  
MIAMI FL 33157



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
17994 S.W. 97 AVE

Suite, Apt. #, etc.  
102

3. Mailing Address  
17994 S.W. 97 AVE

Suite, Apt. #, etc.  
102

City & State  
MIAMI FL

City & State  
MIAMI FL

Zip  
33157

Country

Zip  
33157

Country

4. FEI Number  
65-0943416

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ENGLISH, RICHARD E  
17994 SW 97 AVE STE 101  
MIAMI FL 33157

7. Name and Address of New Registered Agent

Name CHAZIN, DAVID D  
Street Address (P.O. Box Number is Not Acceptable)  
17994 SW 97 AVE STE 102

City MIAMI FL Zip Code 33157

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 PRESIDENT DAVID D. CHAZIN

1/16/03  
DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VD  
NAME ENGLISH, RICHARD E  
STREET ADDRESS 17994 S. W. 97 AVE STE 101  
CITY-ST-ZIP MIAMI FL 33157 ☒ Delete

TITLE PD  
NAME CHAZIN, DAVID  
STREET ADDRESS 17994 S.W. 97 AVE STE 101  
CITY-ST-ZIP MIAMI FL 33157 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PD  
NAME CHAZIN, DAVID  
STREET ADDRESS 17994 S.W. 97 AVE STE 102  
CITY-ST-ZIP MIAMI, FL 33157 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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: PRESIDENT DAVID D. CHAZIN 1/16/03 305 259 4831  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)