


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 07, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S32120</b> 1. Entity Name <b>SWISSCO INC. AUTOSALES CLASSIC AND SPORTSCARS</b>	
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Principal Place of Business <b>13151 A 91ST STREET NORTH SUITE 806 A LARGO, FL 33773 US</b>	Mailing Address <b>13151 A 91ST STREET NORTH SUITE 806 A LARGO, FL 33773 US</b>
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**DO NOT WRITE IN THIS SPACE**



04022008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-3057985</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**HONEGGER, ARTHUR  
11310 REGAL LANE  
LARGO, FL 33774**

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IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)  
Signature, typed or printed name of registered agent and title if applicable. DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>U000000882318 04/16/08-80037-003 150.00</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P HONEGGER, ARTHUR 13151 A 91ST STREET N., STE 806 A LARGO, FL 33773</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D HONEGGER, ARTHUR 13151 A 91ST STREET N., STE 806 A LARGO, FL 33773</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST HONEGGER, MARLIS 13151 A 91ST STREET N., STE 806 A LARGO, FL 33773</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** *[Signature]* *Marlis Honegger* *4/2/08 727 688-0694*