2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S33186

1, Entity Name

HSW ENGINEERING, INC.

Principal Place of Business 3820 NORTHDALE BLVD. SUITE 210 B TAMPA, FL 33624

Mailing Address

3820 NORTHDALE BLVD. SUITE 210 B TAMPA, FL 33624

FILED Feb 02, 2005 08:00 AM **Secretary of State**



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (10/03) 01052005

4. FEI Number 59-3057969 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WATSON, KENNETH W 713 NEW YORK AVE PALM HARBOR, FL 34683

				IIV	I MIS SPACE
8. The above the obligat	named entity submits this statement for the pulsons of registered agent.	urpose of changing its regist	ered office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable. (NOTE. Regist	ered Agent signature	required when reinstating)	DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Fir Trust Fund Contributio		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECT	TORS			······································
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WATSON, KENNETH W. 713 NEW YORK AVE PALM HARBOR, FL 34683				U00000210629
TATLE NAME STREET ADDRESS CITY-ST-ZIP	V SEGUITI, FRED A. 7235 N. MOBLEY ROAD ODESSA, FL 33556				U00000210629 02/02/05-80088-017 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HENRY, CAROL D. 15910 NORTHLAKE VILLAGE ODESSA, FL			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY - ST- ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				···	
TITLE		·	1		·· ·

12. I hereby certify that the information supplied with this filling 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:

NAME STREET ADDRESS CITY-S7-71P

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR