## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V49697

(8)

SWIFTLY INVESTMENTS, INC.

## **FILED** Jan 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				- 1 1861) BIRIN BIRIN ARING RINIF IRINI 1801 BERNI BI	BII BIBII GIBII BIBII BIBII IDDI
802 NORTH DIXIE HIGHWAY 902 NORTH DIXIE HIGH		/AY			
		LAKE WORTH FL 33460		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	3011.02
				07/08/1992	
2. Principal P	lace of Business	2a. Malling Address		4. FEI Number	Applied For
21		26		60-1415660	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zıp	Country	8. This corporation owes or has paid the o	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes 🗌 No
	9. Name and Address of Curre	nt Registered Agent	<b>84</b> 1 4	10. Name and Address of New Registere	d Agent
	DELAZIZ, AZIZETH M		81 Name	•	
902 N DIXIE HWY			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
LAI	KE WORTH FL 33460		83		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.056	02 and 607.1508, Florida Statuti	es, the above-named cor	poration submits this statement for the purpose	of changing its registered
office or r	egistered agent, or both, in the State or familiar with, and accept the oblic	e of Florida. Such change was a pations of, Section 607,0505. Flo	authorized by the corpora orida Statutes	tion's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE	with the state of	, 2000 00 00 00 00 00 00 00 00 00 00 00 0			
SIGNATURE	Signature, typed or printed name of registered ag		E: Flegislarad Agent signature requ		
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P ODELL ODELL	☐ DELETE	1.1 TITLE		Change Addition
NAME	ODEH, ODEH		1.2 NAME		
STREET ADDRESS	2790 MOORING COURT 206 LANTANA FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VP	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	ABDELAZIZ, AZIZEL M	La Present	2.2 NAME		
STREET ADDRESS	902 NORTH DIXIE HWY		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL		2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE		LJ VELETE	5.1 TITLE 5.2 NAME		
NAME OTOGET ADDRESS			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	. =	☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		· • • · ·
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY- ST- ZIP		

14. Thereby 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 chapted, or on an attachment with an address.

1.8.500