

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000089264

**Entity Name:** SHWAYED, INC.

**Current Principal Place of Business:**

401 DONA DR.  
NOKOMIS, FL 34275

**Current Mailing Address:**

PO BOX 1209  
NOKOMIS, FL 34274 US

**FEI Number:** 45-3654841

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MCANDREW, JEAN BLOOMFIELD  
401 DONA DR.  
NOKOMIS, FL 34275 US

*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.*

**SIGNATURE:** JEAN BLOOMFIELD MCANDREW

04/25/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P, VP  
Name MCANDREW, JEAN BLOOMFIELD  
Address 791 MOHAWK RD  
City-State-Zip: VENICE FL 34293

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** JEAN BLOOMFIELD MCANDREW

**PRESIDENT**

04/25/2017

Electronic Signature of Signing Officer/Director Detail

Date