2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Jul 25, 2005 08:00 AM Secretary of State

1. Entity Name

EURÓLINK AMERICA, LLC



Principal Place of Business_

26691 ROOKERY LAKE DRIVE BONITA SPRINGS, FL 34134

Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

26691 ROOKERY LAKE DRIVE BONITA SPRINGS, FL 34134



07122005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 20-0449161

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HUDSON, CRAIG J

SIGNATURE:

NOT MOITE

26691 ROOKERY LAKE DRIVE BONITA SPRINGS, FL 34134		IN THIS SPACE
	named entity submits this statement for the purpose of changing its regist lons of registered agent	ered office or registered agent, or both, 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 Registered Ag		tered Agent signature required when reinstating) DATE
Filing Fee is \$50.00 Due by September 7, 2005		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUDSON, CRAIG J MR. 26691 ROOKERY LAKE DRIVE BONITA SPRINGS, FL 34134	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP		000000374349 07/25/05-80006-008 50.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and appurer and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the recover or trustee emphasized to execute this report as required by Chapter 608, Florida Statutes.		