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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L33986

(5)

EUROPEAN INVESTMENTS INC.

| • | | | | | |
|--|--|---|--|--|---|
| Principal Place of Business 444 BRICKELL AVE. SUTIE 51-248 MIAMI FL 33131 | | Mailing Address 444 BRICKELL AVE. SUTIE 51-246 MIAMI FL 33131-2403 | | L INDUIANT OPE FATOR VIAID ERINAL VIAID E | JIY DIDIN BUQU BUGU BUGU BUGU TARK 1901 |
| | | | | Date Incorporated or Qualified 12/05/1989 | 5a. Date of Last Report 05/01/1996 |
| 2. Principa P | lace of Business | 2a. Mailing Address 26 | | 4, FEI Number 65-0173129 | Applied For Not Applicable |
| Suite Apt | # etc | Suite, Apt. #, etc. | —————————————————————————————————————— | 5. Certificate of Status Desired | \$8.75 Additional Fee Regulred |
| City & State | 0 | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | Country | 28 Z(p | Country | Trust Fund Contribution | Added to Fees or intangible tax under s. 199.032, |
| 24 | 25] | 29 | 30 | Florida Statutes | Yes 🔼 No |
| | 9, Name and Address of Curren | t Registered Agent | | 10. Name and Address of New | Registered Agent |
| | FIDUCIARY INC. | | B1 Name | FIDUCIARY INC. | |
| Street Address | | | | ddress (P.O. Box Number is Not Accept S.E. 2nd Street Sui | table) |
| | E-51-240 | | | S.E. Znd Street Sul | te 2315 |
| MIAN | /II FL 33131 | | 83 | | |
| | | | 84 City | | FL 85 Zip Code |
| 11, Pursuant | to the provisions of Sections 607 050. | 2 and 607.1508, Florida Statu | es, the above-named of | Doration submits this statement for the oration's board of directors. I hereby acc | e purpose of changing its registered |
| office or r | egistered agent, or both, in the State | of Florida. Such change was | nuthorized by the corpo | pration's board of directors. I hereby acc | cept the appointment as registered |
| CHOCKER TO BEE | The STRUCTS OIL TIM | D | 1 | . | 1 |
| SIGNATURE | IBC FIDUCIARY INC. | BY: | E: Registered Agent signatur in | equired when reinstating) | April 22, 1997 |
| 12. | OFFICERS ANI | DIRECTORS | 13. | ADDITIONS/CHANGES TO OF | FICERS AND DIRECTORS IN 12 |
| THE | AS | DELETE | 1.1 TITL€ | : | Change Addition |
| NAME | CARBAYO, E | | 1.2 NAME | | |
| STREET ACORESS | 444 BRICKELL AVENUE #51-24 | 16 | 1.3 STREET ADDRESS | | |
| C⊞ - S⊺ - ZIP | MIAMI FL | | 1.4 CITY-ST-ZIP | | |
| TITLE | DP | DELETE | 2.1 TITLE | VP | Change Addition |
| NAME | LOFDAL, R. | | C. E. 19 HAIC | LOFDAL, R. | · . |
| STREET ADDRESS | KARLSGATAN 3 | | 2.3 STREET ADDRESS | KARLSGATAN 3 | ļ |
| Cify - \$1 - 7IP | HELSINGBORG, SWEDEN | | 2. 4 CITY - ST - ZIP | HELSINGBORG, SWEDEN | |
| TITLE | VPAS | DELETE. | . 3.1 TITLE | S | Change Addition |
| NAME | SMEJDA, L. | | 3.2 NAME | SMEJDA, L | |
| STHEET ADDRESS | 444 BRICKELL AVE #51-246 | | 3.3 STREET ADDRESS | 444 BRICKELL AVE. \$5] | 1-246 |
| C0.Y-\$1-Zir | MIAMI FL | | 3 4. CITY - ST - ZIP | MIAMI, FL | |
| 1111 | DS . | ☑ DELETE | 4.1 TITLE | DP | Change 🔀 Addition |
| NAME | HENLEY, J. | | 4. 2 NAME | BOWDEN, J. | |
| STREET ADORESS | 444 BRICKELL AVE #51-246 | | 4.3 STREET ADDRESS | 444 BRICKFLL AVE. #5] | L246 |
| CITY - ST - ZIF | MIAMI FL | T Krityr | 4.4 CITY - ST - ZIP | rIAMI FL | Change X Addition |
| TITLE | | DELETE | 5.1 TITLE | DVP | Change 🛣 Addition |
| NAME | | | 5.2 NAME | HENNING, U. | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | 444 BRICKELL AVE. #51 | L-246 |
| C-17 - \$1 - ZIP | | ☐ DELETE | 5.4 CITY - ST - ZIP | MIAMI, FL | Change Addition |
| THE | | ☐ DETEIC | 6.1 TifLE | | L. Change L. Auditori |
| NAME | | | 6.2 NAME | | ŧ |
| STREET ADDRESS: | | | 6.3 STREET ADORESS | | |

SIGNATURE:

்ர். Bowden

14. I do hereby 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 chamed, or on an attachment with an address.

4/22/87

(305) 358-4441

FILED

May 02 1997 8:00am

Secretary of State

Daytime Phone # 0173850