


2004 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # F98000001844
 1. Entity Name
 EUROPEAN MICRO HOLDINGS, INC.



Principal Place of Business: 6073 NW 167 STREET, UNIT C-25 MIAMI, FL 33015
 Mailing Address: 6073 NW 167 STREET, UNIT C-25 MIAMI, FL 33015

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04202004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0803752	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 PARKER, CLAYTON E
 201 S BISCAYNE BLVD., 20TH FL
 MIAMI, FL 33131

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8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature: typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SHIELDS, HARRY D 808 THIRD AVENUE SOUTH NASHVILLE, TN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GALLAGHER, JOHN B 6073 NW 167 STREET UNIT C-25 MIAMI, FL
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 04/29/04-80072-024 150.00

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12. I 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 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: Harry Shields Harry shields Date: 615-242-9992
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Customer Phone ext 224