

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90199 005 ***158.75

DOCUMENT # L33986

1. Entity Name
EUROPEAN INVESTMENTS INC.



Principal Place of Business
444 BRICKELL AVE.
SUITE 51-246
MIAMI, FL 33131

Mailing Address
444 BRICKELL AVE.
SUITE 51-246
MIAMI, FL 33131



2. Principal Place of Business
14 Rue des Bains

3. Mailing Address

Suite, Apt. #, etc.
International Center

Suite, Apt. #, etc.

City & State
Luxembourg

City & State

02202006 Chg-P CR2E034 (11/05)

Zip
L-1212

Country
Luxembourg

Zip

Country

4. FEI Number
65-0173129

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

IBC FIDUCIARY INC.
100 S.E. 2ND STREET
STE. 2222
MIAMI, FL 33131

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
LOFDAL, R
KARLSGATAN 3
HELSINGBORG, SWEDEN, SE SWEDEN ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
LOFDAL, R
Stortorget 9
25220 Helsingborg, Sweden, SW ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
HENLEY, J
444 BRICKELL AVE #51-246
MIAMI, FL 33131 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TS
HENLEY, J
444 BRICKELL AVE., 51-246
MIAMI, FL 33131 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TAS
Henley, J
444 Brickell AVE # 51-246
Miami, FL 33131 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
ROMAN, M
444 BRICKELL AVE., 51-246
MIAMI, FL 33131 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
Roman, M
444 Brickell AVE # 51-246
Miami, FL 33131 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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. 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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *R. LOFDAL* President

02-20-2006

305 358 4441

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Phone Number