2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# L33986

Address:

City-St-Zip:

FILED Aug 28, 2009 Secretary of State

Entity Nan	ne: EUROPE	AN INVESTMENTS INC.				
Current Pi	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
	ES BAINS TIONAL CTR URG, L 1212					
Current M	ailing Addres	s:	New Maili	New Mailing Address:		
444 BRICK SUTIE 51-2 MIAMI, FL	246					
FEI Number:	65-0173129	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
IBC FIDUC 100 S.E. 21 STE. 2315 MIAMI, FL	ND STREET					
The above in the State		submits this statement for the p	ourpose of changing i	ts registered	d office or registered agent, or bot	th,
SIGNATUR	RE:					
	Electror	ic Signature of Registered Ag	ent		Date	_
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () LOFDAL, R FAGELSANGS	Delete GATAN 6 S-252 20 G, SWEDEN, SE	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	DVP () PAULSON, M 444 BRICKELL MIAMI, FL 331		Title: Name: Address: City-St-Zip:	PAULSON, M	LL AVE #51-246	
Title: Name: Address: City-St-Zip:	TAS () HENLEY, J 444 BRICKELL MIAMI, FL 331		Title: Name: Address: City-St-Zip:	NUH, A	(X) Change () Addition ELL AVE., 51-246 I3131	
Title: Name: Address: City-St-Zip:	S () SMEJDA, L 444 BRICKELL MIAMI, FL 331		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	()	Delete	Title: Name:	AS NUH, A	() Change (X) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

Address:

City-St-Zip:

444 BRICKELL AVE., 51-246

MIAMI, FL 33131

SIGNATURE: L. SMEJDA 08/28/2009 S