

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000011650

Entity Name: EURO-AMERICAN FINANCE NETWORK, INCORPORATED**Current Principal Place of Business:**6624 WOODY COURT
LEESBURG, FL 34748**Current Mailing Address:**6624 WOODY COURT
LEESBURG, FL 34748**FEI Number:** 59-3126061**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STEFANOVIC, SLAVOLJUB
6624 WOODY CT.
LEESBURG, FL 34748 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRES
Name	STEFANOVIC, SLAVOLJUB
Address	6624 WOODY CT.
City-State-Zip:	LEESBURG FL 34748

Title	BOD
Name	STEFANOVIC, MARIA
Address	718 S. WASHINGTON ST.
City-State-Zip:	MARION IN 46952

Title	CEO
Name	STEFANOVIC-MUNDT, ALEXANDRA
Address	462 BOONE TRAIL ROAD
City-State-Zip:	DANVILLE KY 40422

Title	BOD
Name	STEFANOVIC, CHRISTINA
Address	501 EAST 4TH ST. APT. 509
City-State-Zip:	MARION IN 46952

Title	BOD
Name	STEFANOVIC, LJUBICA
Address	6624 WOODY CT.
City-State-Zip:	LEESBURG FL 34748

I hereby 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 all other like empowered.

SIGNATURE: SLAVOLJUB STEFANOVIC**PRESIDENT****04/16/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date