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PROFIT CORPORATION ANNUAL REPORT

1997



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SIGNATURE:

FLORIDA DEPARTMENT OF STATE

FILED

Apr 04 1997 8:00am

Secretary of State

305-2557181

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 563743

(4)

EURASIA, INC.

Mailing Address Principal Place of Business 8300 SW 142 STREET 8300 SW 142 STREET MIAMI FL 33158-1051 MIAMI FL 33158 3a. Date of Last Report 3. Date Incorporated or Qualified 04/04/1978 03/19/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1855391 21 Not Applicable 26 Suite, Apl. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 216 Z_{ip} Country Country 8. This corporation has liability for intangible tax under s. 199.032, 30 Yes 🔲 No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CHUNG, IN SOO **ゴリルタ** CHUNG WHA8300 SW 142 STREET ess (P.O. Box Number is Not Acceptable) 82 Street Addr **MIAMI FL 33158** 5W 142 300 63 84 City Zip Code MIAMI 33158 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agen 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 13. Addition ☐ DELETE Change 1.1 TITUE CHUNG, WHA JUNG 1.2 NAME CR2E034 MAVE **8300 SW 142ND STREET** 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CH1-SI-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition Tille 2.1 TITLE CHUNG. IN SOO NAME 2.2 NAME 8300 SW 142ND STREET STREET ADORESS 2.3 STREET ADDRESS MIAMI FL 2 4 CITY - ST - ZIP DELETE Addition THEF 31 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CHY - \$1 - 769 DELETE Change Addition THE 4.1 TITLE 4. 2 NAME MMS 4.3 STREET ADDRESS STREET ADDRESS: 4.4 CITY-ST-ZIP DELETE Change Addition TIBLE 5.1 TITLE MAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP DITY SI-72 DELETE Change ■ Addition 1010 61 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP COTY - \$1 - 71P

14. I do hereby certify that the information supplied with this fiting 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