

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 28 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F93000003038 (7)

1. Corporation Name

EUROPASKY CORPORATION



Principal Place of Business

Mailing Address

150 153RD AVE  
STE 200  
MADEIRA BCH FL 33708  
US

150 153RD AVE  
STE 200  
MADEIRA BCH FL 33708  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

07/01/1993

4. FEI Number

59-3130080

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

Deborah A. Vitale

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

150 - 153rd Ave., Suite 200

83

84 City

Madeira Beach

FL

85

Zip Code  
33708

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 607.0508, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent, or both, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-6-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DC

☐ DELETE

NAME

VITALE, DEBORAH A.

STREET ADDRESS

150 153RD AVE, STE 200

CITY-ST-ZIP

MADEIRA BCH FL

TITLE

PD

☒ DELETE

NAME

BULLOCK, LESTER E

STREET ADDRESS

150 153RD AVE., STE. 200

CITY-ST-ZIP

MADEIRA EBAHC FL

TITLE

OFO

☒ DELETE

NAME

GLADSTONE, DEBRA

STREET ADDRESS

150 153RD AVE, STE 200

CITY-ST-ZIP

MADEIRA BCH FL

TITLE

D

☒ DELETE

NAME

HEDLEY, PIERS

STREET ADDRESS

150 153RD AVE., STE. 200

CITY-ST-ZIP

MADEIRA BCH FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

President

☐ Change

☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

Duber, John R.

☐ Change

☒ Addition

2.2 NAME

20018 Westover Avenue

2.3 STREET ADDRESS

Rocky River, Ohio 44116

2.4 CITY-ST-ZIP

3.1 TITLE

Director PAUL DEMATHIA

☐ Change

☒ Addition

3.2 NAME

4002 Pine Forest Drive

3.3 STREET ADDRESS

Parma, Ohio 44134

3.4 CITY-ST-ZIP

4.1 TITLE

Director

☐ Change

☒ Addition

4.2 NAME

Harrison, Gregory A.

4.3 STREET ADDRESS

16209 Kimberly Grove

4.4 CITY-ST-ZIP

Gaithersburg, Maryland 20878

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

4-6-98

813-393-2885

CR2E034 (10/97)