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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	F95000002127	(7)
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EUROPA CASINO MANAGEMENT CORPORATION

3. Date incorporated or Quelified OB/01/1995 2. Principal Place of Business 2. Mailing Actriess 3. Etc. No. 1/1995 2. Principal Place of Business 2. Mailing Actriess 3. Etc. No. 1/1995 3. Date incorporated or Quelified OB/01/1995 3. Date incorporated or Status Desired OB/01/1995 3. Date incorporated OB/01/1995 3. Date incorporated OB/01/1995 3. Date incorporated OB/01/1995 3. Date of Status Desired OB/01/1995 3. Date of Less of Status Desired OB/01/1995 3. Date of Status Desired OB/01/1995
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Suite, Apt. #, etc. 22 27 28 28 29 29 20 20 20 20 20 20
City & State 28 29 20 Country Zip Country Added to Fees A This composition bas liability for intangible tax under is 199.032, Florida Statutes in the provision and address of Current Registered Agent KIEHN, ROLAND W ESQUIRE BARRON, REDDING, HUGHES, FITE ET AL. 220 MCKENZIE AVENUE PANAMA CITY FL 32401 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. Thereby secspit the appointment agent the obligations—of. Section 607.0705, Florida Statutes. SIGNATURE Signature PO INSTER AGENETICAL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE NAME BULLOCK, LESTER ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 INSTER AGENES INSTER ADDRESS INST
Zep Country Zep Country Zep Country Zep Country Zep Country A This corporation has liability for intangible tax under s 199.032, 281 Plonds Statutes Yes No New Registered Agent 10, Name and Address of New Registered Agent 10, Name 10, Na
10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent
KIEHN, ROLAND W ESQUIRE BARRON, REDDING, HUGHES, FITE ET AL. 220 MCKENZIE AVENUE PANAMA CITY FL 32401 11. Pursunt 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 agent, or registered agent, or begin, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered familiar with, and part the obligations of Section 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. It is submitted by the corporation submits this statement for the purpose of changing its registered agent. It is submitted by the corporation submits this statement for the purpose of changing its registered agent. It is submitted by the corporation submits this statement for the purpose of changing its registered agent. It is submitted by the corporation submits this statement for the purpose of changing its registered agent. It is a purpose of purpose of changing its registered agent. It is statement for the purpose of changing its registered agent. It is statement for the purpose of changing its registered agent. It is a purpose of changing its registered agent. It is statement for the purpose of changing its registered agent. It is statement for the purpose of changing its registered agent. It is a purpose of changing its registered agent. It is a purpose of changing its registered agent. It is a purpose of changing its registered agent. It is a purpose of changing its registered agent. It is a purpose of changing its registered agent. It is a purpose of changing its registered agent. It is a purpose of changing its registered agent. It is a purpose of changing its registered agent. It is a purpose of changing its registered agent. It is a purpose of changing its registered agent. It is a purpose of changing its registered agent. It is a purpose of changing its registe
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 19.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF THECTOR

4/ry/46. 813.393 2885