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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DISSION OF CORPORATIONS

DOCUMENT # F9600003981 (5)

EURAM OF TEXAS, INC.

Principal Place of Business

1022 B HORSESHOE BAY NORTH BLVD SUITE #206 HORSESHOE BAY TX 78657		1022 B HORSESHOE BAY NORTH BLVD SUITE #208 HORSESHOE BAY TX 78657							
						3. Date Incorporated or Qualified 08/05/1996	3a. Da	ite of Last F	leport
2. Principal Pi	ace of Business	2a. Mailing Address	ta. Mailing Address			4. FEI Number		A	oplied For
21		26	26			74-2478632		N	ot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	Ŋ	\$8.75 Additional Fee Required		
City & State)	City & State				Election Campaign Financing Trust Fund Contribution	<u></u>		May Be to Fees
Zip	Country	Zip	Col	ntry		8. This corporation has liability for it			
24	25	29	30	.,				No	1. 193.002.
<u></u>	9. Name and Address of Curre		[40]	1		10. Name and Address of New Re			
SEEN	AAN, ERNEST A ESQUIRE			B1	Name				
4729 DEL PRADO BLVD					Ctroot A.	de la	(a)	<u> </u>	
CAPE CORAL FL 33904-9626				82	Street Ac	ddress (P.O. Box Number is Not Acceptab	ie)		
0/4 2				83					
					<u> </u>				
				84	City	14	FL	85 Zip	Code
11 Pursuant i	to the pravisions of Sections 607.05	02 and 607 1508. Florida Statu	tes the a	have	-named co	ornoration submits this statement for the p		chanoing i	ts registered
office or ri agent 1 ai	egistered agont, or both, in the Stat m familiar with, and accept the obli	e of Florida. Such change was gations of, Section 607.0505, Fl	authorize lorida Sta	d by lutes	the corpo	orporation submits this statement for the p tration's board of directors. I hereby accep	it the app	ointment as	registered
SIGNATURE	Signature Typed or priored harne of registered at	nent and title if applicable (NOT	TF Registere	d Ane	nt signatura rei	quired when reinstalling)	DATE		
12.		ND DIRECTORS	13.	o / 190		ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12
THLE	P	DELETE	1.1 7	TLE				Change	Addition
NAME	RAAYMANN, HELGA		1.2 N	AME					
STREET ADDRESS	32022 TWIN SAILS		135	IREET	ADDRESS				
CITY-ST-ZIP	HORSESHOE BAY TX 78657			ITY-S	1				
TITLE	ST	DELETE	211					Change	Addition
NAME	GORDON, MICHAEL		22 N	AME	ł				
STREET ADDRESS	1806 SUNSET DRIVE		235	TREET	ADDRESS				
CITY-ST-ZIP	MARBLE FALLS TX 78654		2 4 (aty-s	ST-ZIP				
TITLE	DELETE			TLE			1		Addition
NAME				NAME					
STREET ADDRESS			3.3 S	TREET	ADDRESS				
CITY-ST-ZIP			3.4. (ITY - S	ST-ZIP				
TITLE		DELETE	4.1 T					☐ Change	Addition
NAME			4.21	AME					
STREET ADORESS			4.3 S	TREET	ADDRESS				
CITY- ST-ZIP			4.4 C	ITY-S	T · ZIP				
TITLE		DELETE	5.1 T	TLE				Change	☐ Addition
NAME			5.2 N	AME	1	•			
STREET ADDRESS			5.3 S	TREET	ADDRESS				
CHY-ST-ZIP			5.4 0	ITY-S	T-ZIP				
THTLE		DELETE	6.1 T					Change	Addition
NAME			6.2 N	AME					
SZARDOA TBARTZ			6.3 \$	TREET	ADDRESS				
CITY-ST-ZIP		· .	6.4 0	TY-\$	T-ZIP				
						nted in Section 119.07(3)(i), Florida Statute			
I am an o	on indicated on this armual report or fficer or director of the corporation or Block 12 or Block 13 if changed	or the receiver or trustee empoy	wered to	exec	ute this re	hat my signature shall have the same lega port as required by Chapter 607, Florida S	tatules; a	nd that my	name

SIGNATURE:

210-598-8502

FILED

Feb 04 1997 8:00am

Secretary of State