2002 INVIEGBLE BUSINESS BEBORT MIRRI

DOCUMENT # J11395				FILED			
ERA EUROPE, INC.				02 JUL -8 PM 1:23			
Principal Place of Business 3260 UNIVERSITY BLVD SUITE 210 WINTER PARK FL 32792 US			SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business Mailing Address				T IORISIA POPAT NIORI MIDOU FILLID ARIBITAL	EEF BABAR DADAR BISIN DISIN A	BIBLI BIBLI (BB)	
Suite, Apt. #, etc. Suite, Apt. #, etc.		•					
City & State	City & State			59-2672428		opplied For lot Applicable	
Zip Country	Zip C	Country		Certificate of Status Desired \$8.75 Additional Fee Required			
6. Name and Address of Current R	egistered Agent	Name _	7. (Name and Address of New Reg	istered Agent		
HADDOCK, EDWARD E JR			JAMES F. HEEKIN, JR.				
3260 UNIVERSITY BOULEVARD			Street Address (P.O. Box Number is Not Acceptable) 215 North Eola Drive				
SUITE 210		Orlando, Florida 32801					
WINTER PARK FL 32792		City	•		FL Zip Co	de	
8. 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 for printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! After May 1, 2002 Make Check Payable		ee will be \$5	50.00	10. Election Campaign Finan Trust Fund Contribution.		00 May Be d to Fees	
TITLE D	Delete	12.		DITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR Change		
NAME HEAVENER, JAMES W STREET ADDRESS 731 PINE TREE ROAD WINTER PARK FL 32789	LJ Delae	NAME STREET ADDRESS CITY-ST-ZIP	·D/P		X) cumila	Addition 6	
	DICKEY, HELEN			/P DDOCK, EDWARD E. JR. 60 University Boulevard, #210 nter Park, Florida 32792			
TITLE V NAME HEAVENER, CHRISTIE C STREET ADDRESS 731 PINE TREE ROAD CITY-ST-ZIP WINTER PARK FL 32789		STREET ADORESS	3260 Un	D/P Change & Addition HELPS, JONATHAN 260 University Boulevard, Suite 210 Inter Park, Florida 32792			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>winter</u>	rark, Florida 32	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Imag \$150.0 Valida	e API Deposition, cleared on the	ted Change 4/8/02 ansfer	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	ok pe	r Sean	☐ Change	Addition	
13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: 3/11/02 SIGNAPORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Display Phone #							