

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K35645** (6)

1. Corporation Name

YUPPIE EURO, INC.



Principal Place of Business

**HIGHWAY 486
P.O. BOX 2349
CRYSTAL RIVER FL 32623-2349**

Mailing Address

**HIGHWAY 486
P.O. BOX 2349
CRYSTAL RIVER FL 32623-2349**

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

09/30/1988

3a. Date of Last Report

04/27/1995

4. FEI Number

59-2909689

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**GASSMAN, ALAN S.
1245 COURT STREET
SUITE 102
CLEARWATER FL 34616**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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.

SIGNATURE

Signature typed or printed name of registered agent and date of appointment

(If NE, Registered Agent signature required when receiving change)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

**DP
DAMRON, LEONARD A. III
4290 W. HWY 486
CRYSTAL RIVER FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

**S
DAMRON, DIANE
4290 W HWY 486
CRYSTAL RIVER FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

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 119.07(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:

Leonard A. Damron III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LEONARD A DAMRON III 5/21/96

DATE

Daytime Phone #

(352) 746-3011

CR2E034 (12/95)