

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 12, 2005
Secretary of State

DOCUMENT# N03000010535

Entity Name: E U CLUB, INC.

Current Principal Place of Business:4202 E. BUSCH BLVD., STE. 6
TAMPA, FL 33617**New Principal Place of Business:****Current Mailing Address:**4202 E. BUSCH BLVD., STE. 6
TAMPA, FL 33617**New Mailing Address:**

FEI Number: 80-0083258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:MIRZA, DZUBUR
4202 E. BUSCH BLVD., STE. 6
TAMPA, FL 33617 US**Name and Address of New Registered Agent:**KAJTAZ, ADNAN
4202 E. BUSCH BLVD., STE. 6
TAMPA, FL 33617 US

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: ADNAN KAJTAZ

07/12/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: DZUBUR, MIRZA
Address: 4400 1ST ST. N #407
City-St-Zip: ST. PETERSBURG, FL 33703Title: SD () Delete
Name: BOSKOVIC, FERIZ
Address: 861 90TH AVE N.
City-St-Zip: ST. PETERSBURG, FL 33702Title: D () Delete
Name: ALIMANOVIC, MUSTAFA
Address: 12708 BRUCE B. DOWNS BLVD., #212
City-St-Zip: TAMPA, FL 33612Title: D () Delete
Name: PERUCICA, MIRKO
Address: 19013 SILVERBROOK DR.
City-St-Zip: TAMPA, FL 33647**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change () Addition
Name: KAJTAZ, ADNAN
Address: 6334 55 AVN. N.
City-St-Zip: ST. PETERSBURG, FL 33709Title: SD (X) Change () Addition
Name: KAJTAZ, SABINA
Address: 6334 55AVN N.
City-St-Zip: ST. PETERSBURG, FL 33709Title: D (X) Change () Addition
Name: BOSKOVIC, FERIZ
Address: 861 90TH AVE N.
City-St-Zip: ST. PETERSBURG, FL 33702Title: D (X) Change () Addition
Name: JUSOVIC, ISMET
Address: 501 46AVE N.
City-St-Zip: ST. PETERSBURG, FL 33703

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAJTAZ ADNAN

PD

07/12/2005

Electronic Signature of Signing Officer or Director

Date