2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2000 8:00 am
Secretary of State
05-08-2000 90130 002 ****61.25

DOCUMENT # N04956

1. Entity Name

EUZKAL TXOKO, INC.

Principal Place of Business	Mailing Address
5025 E FOWLER AVE 11 TAMPA FL 33607	3119 ABDELLAST TAMPA FL 33607-1504

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4009 North Howard Ave	3119 Abdella Street.
Suite, Apt. #, etc.: Clubhouse	Suite, Apt. #, etc.
City & State: Tampa, Florida 33	City & State
Zip: 33607 Country: USA	Zip Country

4. FEI Number 59-2463031 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
IRUSTA, AITOR 4509 S. OAK DR SUITE 0-21 TAMPA FL 33611	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CHURRUCA, JOSE 3119 ABDELLA ST TAMPA FL 33607	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHURRUCA, JOSE 511 N BEVERLY AVE TAMPA FL 33609-1409	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JUAN CHURRUCA 511 N. BEVERLY AVE. TAMPA, FLORIDA 33609-1409	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ZULAIKA, JESUS M 6712 MACINA POINTE VILLAGE CT #208 TAMPA FL 33635	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D. ZULAIKA, JESUS M. 5711 EAST LONG BOAT BLVD TAMPA FLORIDA 33615	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD AGUIREZABAL, JUAN L 8820 BRENNAN CIR #105 TAMPA FL 33615	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T.D AGUIREZABAL, JUAN L. 8820 BRENNAN Circle #105 TAMPA, FLORIDA 33615	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED José Churruca 4-21-00 (813) 254-2005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #