2006 FOR PROFIT CORPORATION ANNUAL REPORT

Aug 15, 2006 8:00 am Secretary of State 08-15-2006 90002 022 ***163.75 **DOCUMENT # P00000081394 EURO-AMERICAN PETROLEUM CORPORATION** 40101263 Principal Place of Business Mailing Address 2800 UNIVERSITY BLVD. #131 2800 UNIVERSITY BLVD, #131 JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32216 2. Principal Place of Business 3. Malling Address 4612 Slash Pine Ave. So. 4612 Slash Pine Ave. So. Suite, Apt. #, etc. Suite, Apt. #, etc. 07262006 Chg-P CR2E034 (11/05) - City & State. City & State 4. FEI Number Applied For Homosassa, Florida Homosassa, Florida 59-2870289 Not Applicable Zip:34446:-Zip 34446 \$8.75 Additional 5. Certificate of Status Desired Citrus Citrus Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LANGIONE, ARTHUR E Street Address (P.O. Box Number Is Not Acceptable) 2800 UNIVERSITY BLVD. #131 JACKSONVILLE, FL. 32216 City 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. I am familiar with, and accept the obligations of registered agent. Arthur E. Langione SIGNATURE. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 6, 2006 Added to Fees corporation did not receive the prior notice. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE ☐ Change NAME LANGIONE, ARTHUR E NAME STREET ADDRESS 2800 UNIVERSITY BLVD. #131 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP JACKSONVILLE, FL 32216 X Delete TITLE Change ☐ Addition TITLE Secretary-Treasurer JOHNSON, EDWARD H NAME NAME Johnnie Fosaaen STREET ADDRESS 13246 MORNING SUN DR. STREET ADDRESS 831 Nightingale. Rd Backsonville Fl 32216 CITY-ST-ZIP -JACKSONVILLE, FL 32225 City-St-Z#P TITLE ☐ Change ☐ Addition ☐ Delete TRUE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Deleta TITLE ☐ Change Addition TILE NAME NAME STREET ADDRESS STREET ADDRESS City-St-7P CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CGY-ST-ZP CITY-ST-ZIP ☐ Change Addition ☐ Deleta TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Arthur E. Langione

angroad

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

8/12/2006

Daytime Phone #

ATTACHMENT

40101529 #P00000081394

Hello, As you will note we have a change of address and a replacement for Sect'y-Treas. I followed instructions as well as I could via extension #4.
Respectfully, Arthur E. Langione