## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P00000094149

Entity Name: EUROAMERICAN TELEAXIS, INC.

FILED Apr 17, 2003 Secretary of State

| Current P                                     | rincinal Place                                      | e of Business:                        | New Principal Place                         | New Principal Place of Business:          |  |
|---|---|---------------------------------------|---|---|--|
|   | -   |                                       | New Fillicipal Flace                        | Dusiness.                                 |  |
|   | LIAMS ISLAND<br>RA, FL 33160                        | BLVD SUITE 2909                       |   |   |  |
| Current Mailing Address:                      |   |                                       | New Mailing Address                         | New Mailing Address:                      |  |
| 225 N.E. N                                    | AN D PESEL<br>MIZNER BLVD<br>TON, FL 3343           |                                       |   |   |  |
| FEI Number                                    | : 65-1046045  | FEI Number Applied For ( )            | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )         |  |
| Name and Address of Current Registered Agent: |   |                                       | Name and Address of                         | Name and Address of New Registered Agent: |  |
| 225 N.E. N                                    | USAN D P.A.<br>MIZNER BLVD<br>TON, FL 3343          |                                       |   |   |  |
|   | e named entity<br>e of Florida.                     | submits this statement for the        | purpose of changing its registered          | office or registered agent, or both,      |  |
| SIGNATU                                       | RE:   |                                       |   |   |  |
|   | Electro   | nic Signature of Registered Ag        | gent  | Date                                      |  |
|   | mpaign Financin<br>S AND DIREC                      | g Trust Fund Contribution().<br>TORS: | ADDITIONS/CHANGE                            | S TO OFFICERS AND DIRECTORS               |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | KOVARCIK, PE  | S ISLAND BLVD SUITE 2909              | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | VD (<br>PESEL, KAREI<br>2515 NW 99TH<br>CORAL SPRIN | AVE.                                  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | KOVARCIK, IG  | S ISLAND BLVD SUITE 2909              | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                   |  |

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IGOR KOVARCIK SD 04/17/2003