

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 23, 2002 8:00 am**  
**Secretary of State**

04-23-2002 90381 016 \*\*\*150.00

**DOCUMENT # P00000115921**

1. Entity Name

**EURO LATTA, INC.**

Principal Place of Business

**C/O EURO AMERICAN MANAGEMENT INC.  
 4350 W. CYPRESS STREET, SUITE 250  
 TAMPA FL 33607**

Mailing Address

**C/O EURO AMERICAN MANAGEMENT INC.  
 4350 W. CYPRESS STREET, SUITE 250  
 TAMPA FL 33607**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suit **4300 W. Cypress Street  
 Suite 1075**  
 City **Tampa, FL 33607**

Su **4300 W. Cypress Street  
 Suite 1075**  
 Cit **Tampa, FL 33607**

4. FEI Number

**59-3704281**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**AMEURCO MANAGEMENT, INC.  
 4350 WEST CYPRESS STREET, SUITE 250  
 TAMPA FL 33607**

7. Name and Address of New Registered Agent

Name

**4300 W. Cypress Street, Suite 1075  
 Tampa, FL 33607**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida.

**BRUCE D. BURDGE  
 EXECUTIVE VICE PRESIDENT**

**APR 4 2002**

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **EV**  Delete  
 NAME **BURDGE, BRUCE D**  
 STREET ADDRESS **4350 W. CYPRESS ST, SUITE 250**  
 CITY-ST-ZIP **TAMPA FL 33607**

TITLE  Change  Addition  
 NAME **4300 W. Cypress Street**  
 STREET ADDRESS **Suite 1075**  
 CITY-ST-ZIP **Tampa, FL 33607**

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
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TITLE  Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**BRUCE D. BURDGE  
 EXECUTIVE VICE PRESIDENT**

**APR 4 2002**

Date

Daytime Phone #

**813-  
 353-8800**

CR2E034 (9/01)