

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000070450

Entity Name: EUROPE FINANCE, INC.

FILED  
Feb 28, 2004  
Secretary of State

## Current Principal Place of Business:

2208 RIDGEWOOD CIRCLE  
ROYAL PALM BEACH, FL 33411

## New Principal Place of Business:

122 N DIXIE HWY  
WEST PALM BEACH, FL 33401

## Current Mailing Address:

2208 RIDGEWOOD CIRCLE  
ROYAL PALM BEACH, FL 33411

## New Mailing Address:

FEI Number: 65-1142089

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FREEDMAN & MCCLOSKEY, P.A.  
ONE EAST BROWARD BLVD., STE. 700  
FT. LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: OLSCHEWSKI, KRZYSZTOF  
Address: 2208 RIDGEWOOD CIRCLE  
City-St-Zip: ROYAL PALM BEACH, FL 33401

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: OLSCHEWSKI, KRZYSZTOF  
Address: 2208 RIDGEWOOD CIRCLE  
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: OLSCHEWSKI

DPS

02/28/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date