2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000082435

1. Entity Name

ALL EUROPE RAIL CORPORATION



FILED Mar 03, 2003 8:00 am § Secretary of State

03-03-2003 90475 033 ***150.00

					WE THIS			
Principal Place of Business 1675 NW 41ST STREET OAKLAND PARK FL 33309			Mailing Address 1675 NW 41ST STREET OAKLAND PARK FL 33309			 	B)	i i 118 3 4 3 60k 1881
2. Principal I	Place of Busin	ness	3. Mailing Address					
Suite, Apt. #, etc.			Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING	CHANGES	6
City & State			City & State			4. FEI Number 65-1140272		applied For
Zip Country		Zip Country		try	5. Certificate of Status Desired	\$8.75 Ac	ditional	
	6. Name	and Address of Current	Registered Agent	1		7. Name and Address of New Registered /		
			<u> </u>		Name	traine and Address of New Hegistered A	- Gent	
AVILA, DE	ESIREE _ 41ST STRE	ET	ر رسونسے دانے			(P.O. Box Number is Not Acceptable)		
	PARK FL							
	* 5 .				City	FL	Zip Cod	
signature	tions of regist	y submits this statement for ered agent. or printed name of registered agent			ed office or register Agent signature required	red agent, or both, in the State of Florida. I am f	amiliar with	, and accept
36(7)			and title if applicable. (1401	c. negistered	Agent signature required	d when reinstating) DATE		
1 Afte	r May 1, 200	! FEE IS \$150.00 3 Fee will be \$550.00 Florida Department o	f State			9. Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees
10.	· · · · · · · · · · · · · · · · · · ·	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND	DIDECTOR	10 (6) 44
TITLE	D ,	31110211071110		_	· · · ·	ADDITIONS/CHANGES TO OFFICERS AND		
NAME STREET ADDRESS CITY-ST-ZIP	AVILA, DE 1675 NW	Siree 41st street Park Fl 33309	☐ Delete		•		Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		T ADDRESS		Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	and the second		☐ Delete	CITY-S			☐ Change	Addition
12. I hereby c	ertify that the	information supplied with	this filing does not qualify for	the exem	otion stated in Sec	ction 119.07(3)(i). Florida Statutes, Lifurther certi	fy that the i	oformation

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 receive or truetee 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.)

SIGNATURE: