

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90255 042 ***150.00

DOCUMENT # P02000024512

1. Entity Name
EUROPEAN IMPORT GROUP INC.



Principal Place of Business
3321 E. OAKLAND PARK BLVD., STE. 314
FT. LAUDERDALE, FL 33308

Mailing Address
3321 E. OAKLAND PARK BLVD., STE. 314
FT. LAUDERDALE, FL 33308

2. Principal Place of Business
5920 NE 15th AVE
Suite, Apt. #, etc.

3. Mailing Address
5920 NE 15th AVE
Suite, Apt. #, etc.



03302004 Chg-P CR2E034 (10/03)

City & State
FT. LAUDERDALE, FL
Zip
33334
Country
USA

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FT. LAUDERDALE, FL
Zip
33334
Country
USA

4. FEI Number
20-0116082
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MEHNE, ANDREW B
3321 E. OAKLAND PARK BLVD.
#314
FORT LAUDERDALE, FL 33308

7. Name and Address of New Registered Agent

Name
ANDREW B. MEHNE
Street Address (P.O. Box Number is Not Acceptable)

5920 NE 15th AVE

City
FT. LAUDERDALE FL Zip Code
33334

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.

SIGNATURE *Andrew B. Mehne*

4-23-2004

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PVST
MEHNE, ANDREW B
3321 E. OAKLAND PARK BLVD., #314
FORT LAUDERDALE, FL 33308 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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CITY-ST-ZIP
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Andrew B. Mehne* ANDREW B. MEHNE

4-23-2004 (954) 533-2753

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #