

2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

04-29-2004 90232 028 ***150.00

DOCUMENT # P03000032745					
1. Entity Name EUROPE GALLERY INC.					
Principal Place of Business 6020 BARLOWICH, CPA 5313 MCKINLEY STREET HOLLYWOOD, FL 33021			Mailing Address 6020 BARLOWICH, CPA 5313 MCKINLEY STREET HOLLYWOOD, FL 33021		
2. Principal Place of Business 2800 NL FEDERAL HWY Suite, Apt. #, etc.		3. Mailing Address 1446 NW 2nd AVE Suite, Apt. #, etc. Suite 105			
City & State Boca Raton, FL		City & State Boca Raton, FL		4. FEI Number 76-0727811	
Zip 33432		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ZARAFLOWICH, CPA P.A. 5313 MCKINLEY STREET HOLLYWOOD, FL 33021			7. Name and Address of New Registered Agent MARY DORAK 1446 NW 2ND AVE SUITE 105 Boca Raton FL 33432		
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 DATE 4/14/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
(Empty row for Officer/Director)			President Tamaz Djan 3500 NW Boca Raton BLVD Boca Raton, FL 33431		
(Empty row for Officer/Director)			Vice President Besalel Bel 3500 NW Boca Raton BLVD Boca Raton, FL 33431		
(Empty row for Officer/Director)			Secretary/Treasurer Jacques Horn 3500 NW Boca Raton BLVD Boca Raton, FL 33431		
(Empty row for Officer/Director)			(Empty row for Officer/Director)		
(Empty row for Officer/Director)			(Empty row for Officer/Director)		
(Empty row for Officer/Director)			(Empty row for Officer/Director)		
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:		T. Djan, PR		4/14/04	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small> 561-393-9195	