

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000060214

Entity Name: EUROPOL ENTERPRISES, INC.

FILED
Apr 10, 2009
Secretary of State

Current Principal Place of Business:

PO BOX 1551
OLDSMAR, FL 346771551

New Principal Place of Business:

2513 OLD VILLAGE WAY
OLDSMAR, FL 34677 US

Current Mailing Address:

PO BOX 1551
OLDSMAR, FL 346771551

New Mailing Address:

PO BOX 1551
OLDSMAR, FL 346771551 US

FEI Number: 65-1194802

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOROWSKI, WIESLAW S
4911 OLD VILLAGE WAY
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

HOROWSKI, WIESLAW S
2513 OLD VILLAGE WAY
OLDSMAR, FL 34677 US

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: WIESLAW S HOROWSKI

04/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: HOROWSKI, WIESLAW S
Address: 4911 OLD VILLAGE WAY
City-St-Zip: OLDSMAR, FL 34677

Title: V () Delete
Name: HOROWSKA, KRYSTYNA
Address: 4911 OLD VILLAGE WAY
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: HOROWSKI, WIESLAW S
Address: 2513 OLD VILLAGE WAY
City-St-Zip: OLDSMAR, FL 34677 US

Title: V (X) Change () Addition
Name: HOROWSKA, KRYSTYNA Z
Address: 2513 OLD VILLAGE WAY
City-St-Zip: OLDSMAR, FL 34677 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: WIESLAW S HOROWSKI

P

04/10/2009

Electronic Signature of Signing Officer or Director

Date