

DEC. 22. 2006 2:40PM

C S C

NO. 726 P. 2

FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

2006 DEC 22 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P03000090420

1. Corporation Name

Euro Consulting & Communication Corp.

2. Principal Office Address

21218 St. Andrews Blvd.

3. Mailing Office Address

21218 St. Andrews Blvd.

Suite, Apt. #, etc.

225

Suite, Apt. #, etc.

225

City & State

Boca Raton

City & State

Boca Raton

Zip

33433

Country

USA

Zip

33433

Country

USA

REINSTATEMENT

CRZE081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida 8/18/20035. FEI Number
200514618

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒\$6.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
JOANNA POLOWCZYK ROSSI

Street Address (or P.O. Box Number is not acceptable)

980 FEDERAL HWY

Suite, Apt. #, Etc.

205

City

Boca Raton

State

FL

Zip Code

33432

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0603, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 12/22/06

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	JOANNA POLOWCZYK ROSSI	21218 St. Andrews Blvd.	Boca Raton, FL 33433

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

12/22/06

5613769075

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

H06000300643 3

12/22/06

212

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 205-0384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

CLD

CORPORATION REINSTATEMENT

EURO CONSULTING & COMMUNICATION CORP.

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$1,058.75

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