

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000144048

FILED
Jan 07, 2008
Secretary of State

Entity Name: EUROPEAN IMMIGRATION & TRANSLATION CONSULTANTS, INC.

Current Principal Place of Business:

1250 E HALLANDALE BEACH BLVD
605
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

1250 E HALLANDALE BEACH BLVD
605
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 20-0494510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SORSHER, ALEX
2500-1 N STATE ROAD 7
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VYNER, BATSHEVA
Address: 200 DIPLOMAT PARKWAY #523
City-St-Zip: HALLANDALE, FL 33009

Title: VP () Delete
Name: VYNER, DAVID
Address: 200 DIPLOMAT PARKWAY # 523
City-St-Zip: HALLANDALE, FL 33009

Title: MB () Delete
Name: ANNA, PINKHASOV
Address: 1250 E HALLANDALE, SUITE 605
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VYNER, BATSHEVA
Address: 1250 E HALLANDALE BEACH BLVD # 605
City-St-Zip: HALLANDALE, FL 33009

Title: VP (X) Change () Addition
Name: VYNER, DAVID
Address: 1250 E HALLANDALE BEACH BLVD# 605
City-St-Zip: HALLANDALE, FL 33009

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID VYNER

DR

01/07/2008

Electronic Signature of Signing Officer or Director

Date