

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000011894

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** EUROPEAN SPECIALTY (ESPS) INC.

**Current Principal Place of Business:**

4836 W FOXCREEK DR  
MULBERRY, FL 33860

**New Principal Place of Business:**

**Current Mailing Address:**

4836 W FOXCREEK DR  
MULBERRY, FL 33860

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SOJKA, GERHARD  
4836 W FOXCREEK DR  
MULBERRY, FL 33860      US

**Name and Address of New Registered Agent:**

SOJKA, ERICH  
4836 W FOXCREEK DR  
MULBERRY, FL 33860      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: ERICH SOJKA

02/08/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SOJKA, ERICH  
Address: 4836 W FOXCREEK DR  
City-St-Zip: MULBERRY, FL 33860

Title: VP  
Name: SOJKA, GERHARD  
Address: 4836 W FOXCREEK DR  
City-St-Zip: MULBERRY, FL 33860

Title: TR  
Name: MAYRA, SOJKA  
Address: 4836 W FOXCREEK DR  
City-St-Zip: MULBERRY, FL 33860

I hereby 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 all other like empowered.

SIGNATURE: ERICH SOJKA

P

02/08/2012

Electronic Signature of Signing Officer or Director

Date