04/28/2005 06:35 5613472378 TYMAN CARUSO

FILED
May 04, 2005 8:00 am
Secretary of State
05-04-2005 90120 036 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000041516

1. Entity Name
COMIN EURO IMPORT, CORP.

Principal Place of Business	Mailing Address
1411 SW 11ST TERRACE POMPANO BEACH, FL 33069	1411 SW 11ST TERRACE POMPANO BEACH, FL 33069

2. Principal Place of Business	3. Mailing Address
530 S. Dixie Hwy W.	530 S. Dixie Hwy West
Suite, Apt. #, etc. WEST	Suite, Apt. #, etc. WEST
City & State Pompano Bch, Florida	City & State Pompano Bch, Florida
Zip / Country 33060 / USA	Zip / Country 33060 / USA

04292005 Chg-P CR2E034 (10/03)

4. FEI Number
20-0807542
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COMIN, CHESTER 1411 SW 11ST TERRACE POMPANO BEACH, FL 33069	Name: Chester Comin Street Address (P.O. Box Number is Not Acceptable) 530 S. Dixie Hwy West City: Pompano Bch FL Zip Code: 33060

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: X _____ PRESIDENT 4/29/05
Signature, title or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	PS COMIN, CHESTER 907 CYPRESS TERRACE, # 206 POMPANO BEACH, FL 33069	☐ Delete	PS CHESTER COMIN 530 S. Dixie Hwy West Pompano Bch, FL 33060	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPT COMIN, OLNEI 907 CYPRESS TERRACE, # 206 POMPANO BEACH, FL 33069	☐ Delete	VPT OLNEI COMIN 530 S. Dixie Hwy West Pompano Bch, FL 33060	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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: X _____ Pres. 4/29/05 954-785-5591
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #