

2005 FOR PROFIT CORPORATION ANNUAL REPORT

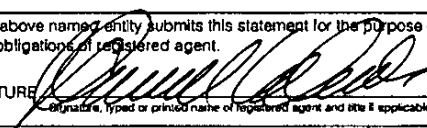
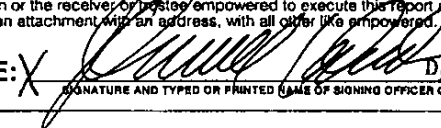
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Mar 28, 2005 8:00 am
Secretary of State

03-28-2005 90079 005 ***150.00

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03162005 Chg-P CR2E034 (10/03)

DOCUMENT # P04000078289					
1. Entity Name EUROPA MANAGER, INC.					
Principal Place of Business 2200 NW CORPORATE BLVD. SUITE 401 BOCA RATON, FL 33431			Mailing Address 2200 NW CORPORATE BLVD. SUITE 401 BOCA RATON, FL 33431		
2. Principal Place of Business 515 E. Las Olas Blvd.		3. Mailing Address 515 E. Las Olas Blvd			
Suite, Apt. #, etc. Suite 1050		Suite, Apt. #, etc. Suite 1050			
City & State Fort Lauderdale, FL		City & State Fort Lauderdale FL		4. FEI Number 20-1132355	
Zip 33301	Country Broward	Zip 33301	Country Broward	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HCRM CORP. 2200 NW CORPORATE BLVD. SUITE 401 BOCA RATON, FL 33431				7. Name and Address of New Registered Agent Name Daniel E. Adache Street Address (P.O. Box Number is Not Acceptable) 515 E. Las Olas Blvd Suite 1050 City Fort Lauderdale FL Zip Code 33301	
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 				DATE 3-23-05	
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	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C Lawrence A. Duprey 515 E. Las Olas Blvd., Suite 1050 Fort Lauderdale, FL 33301	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Daniel E. Adache 515 E. Las Olas Blvd., Suite 1050 Fort Lauderdale, FL 33301	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP Jerrold R. Krystoff 515 E. Las Olas Blvd., Suite 1050 Fort Lauderdale, FL 33301	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP John C. Deinhardt 515 E. Las Olas Blvd., Suite 1050 Fort Lauderdale, FL 33301	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO John Yanopoulos 515 E. Las Olas Blvd., Suite 1050 Fort Lauderdale, FL 33301	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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: 				Date (954) 524-0607	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #	