

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000049857

Entity Name: EURO EMPIRE, INC.

FILED
Dec 12, 2006
Secretary of State

Current Principal Place of Business:

17091 NE 20TH AVE., SUITE 4
N. MIAMI BCH, FL 33162

New Principal Place of Business:

900 NE 2ND STREET
HALLANDALE BEACH, FL 33009 US

Current Mailing Address:

17091 NE 20TH AVE., SUITE 4
N. MIAMI BCH, FL 33162

New Mailing Address:

900 NE 2ND STREET
HALLANDALE BEACH, FL 33009 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYFKOGEL, EFRAIN A
17091 NE 20TH AVE., SUITE 4
N. MIAMI BCH, FL 33162 US

Name and Address of New Registered Agent:

OSORIO, LUIS F
900 NE 2ND STREET
HALLANDALE, FL 33009 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: LUIS F OSORIO

12/12/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RYFKOGEL, EFRAIN A
Address: 17091 NE 20TH AVE., SUITE 4
City-St-Zip: N. MIAMI BCH, FL 33162

Title: VD (X) Delete
Name: BERGLUND, JULIE
Address: 17091 NE 20TH AVE., SUITE 4
City-St-Zip: N. MIAMI BCH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OSORIO, LUIS F
Address: 900 NE 2ND STREET
City-St-Zip: HALLANDALE, FL 33009 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LUIS F OSORIO

P

12/12/2006

Electronic Signature of Signing Officer or Director

Date