

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000066453

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** EUROPA RESTAURANT, INC.

**Current Principal Place of Business:**

326 LINDEN BLVD  
WEST HEMPSTEAD, NY 11552

**New Principal Place of Business:**

**Current Mailing Address:**

326 LINDEN BLVD  
WEST HEMPSTEAD, NY 11552

**New Mailing Address:**

**FEI Number:** 27-0424988

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAPP, MICHAEL  
5850 S. PINE ISLAND ROAD  
DAVIE, FL 33328 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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** LEON, BARRY  
**Address:** 326 LINDEN BLVD  
**City-St-Zip:** WEST HEMPSTEAD, NY 11552

**Title:** VD  
**Name:** RAPP, MICHAEL  
**Address:** 5850 S. PINE ISLAND ROAD  
**City-St-Zip:** DAVIE, FL 33328

**Title:** STD  
**Name:** LEON, BARRY  
**Address:** 326 LINDEN BLVD  
**City-St-Zip:** WEST HEMPSTEAD, NY 11552

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:** BARRY LEON

PRES

05/01/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date