

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

May 14 1997 8:00a
Secretary of State

DOCUMENT # P93000001209 (4)

Corporation Name
EUROEXPORT OF AMERICA, CORP.

Principal Place of Business

1 BRICKELL AVE
SUITE 710
MIAMI FL 33131

Mailing Address

PO BOX 01204
MIAMI FL 33101-2204
US

3. Date Incorporated or Qualified 01/04/1993
3a. Date of Last Report 05/01/1996

Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0375635

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$0.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☒ \$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

8. Name and Address of Current Registered Agent

SALAS, LARISA
115 SW 136 CT
MIAMI FL 33184

10. Name and Address of New Registered Agent

01 Name ERA, LAPINA
02 Street Address (P.O. Box Number is Not Acceptable) 11312 S.W. 67th Terr.
03
04 City MIAMI Zip Code 33173 FL

I, Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

04.04.97.

DATE

2. OFFICERS AND DIRECTORS

1.1 TITLE	PV	☐ DELETE
1.2 NAME	ERA, RICH	
1.3 STREET ADDRESS	11312 SW 67 TERRACE	
1.4 CITY-STATE-ZIP	MIAMI FL	
2.1 TITLE	VTS	☐ DELETE
2.2 NAME	SALAS, LARISA	
2.3 STREET ADDRESS	115 SW 136 CT	
2.4 CITY-STATE-ZIP	MIAMI FL	
3.1 TITLE		☐ DELETE
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-STATE-ZIP		
4.1 TITLE		☐ DELETE
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		
5.1 TITLE		☐ DELETE
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		
6.1 TITLE		☐ DELETE
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-ZIP		

15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PV	☒ Change ☐ Addition
1.2 NAME	ERA, LAPINA	
1.3 STREET ADDRESS	11312 S.W. 67th Terr.	
1.4 CITY-STATE-ZIP	MIAMI, FLORIDA 33173	☐ Change ☐ Addition
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-STATE-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-STATE-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-ZIP		

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE E. LAPINA

SIGNATURE REQUIRED

PRESIDENT 04.04.97. (305) 374-41-11

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

E. Lapina

0054618