

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000019752

FILED  
Apr 11, 2006  
Secretary of State

Entity Name: EUROPEAN GOURMET CONNECTION, INC.

## Current Principal Place of Business:

3018 ROUND TABLE CT  
NAPLES, FL 34112 US

## New Principal Place of Business:

1224 COMMONWEALTH CIR  
N-103  
NAPLES, FL 34116 US

## Current Mailing Address:

3018 ROUND TABLE CT  
NAPLES, FL 34112 US

## New Mailing Address:

1224 COMMONWEALTH CIR  
N-103  
NAPLES, FL 34116 US

FEI Number: 65-0395419

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ULF LEISTE  
3018 ROUND TABLE CT  
NAPLES, FL 34112 US

## Name and Address of New Registered Agent:

ULF LEISTE  
1224 COMMONWEALTH CIR  
N-103  
NAPLES, FL 34116 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: \_\_\_\_\_

04/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: LEISTE, ULF  
Address: 3018 ROUND TABLE CT  
City-St-Zip: NAPLES, FL 34112

Title: VSD ( ) Delete  
Name: LEISTE, GABRIELE  
Address: 3018 ROUND TABLE CT  
City-St-Zip: NAPLES, FL 34112

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: LEISTE, ULF  
Address: 1224 COMMONWEALTH CIR  
City-St-Zip: NAPLES, FL 34116

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: ULF LEISTE

PTD

04/11/2006

Electronic Signature of Signing Officer or Director

Date