SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $235 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $875)

PROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUL -3 AM 8:37

DOCUMENT # **P93000044542 (7)**

1. Corporation Name

EURO-AMERICAN ENTERTAINMENT ASSOCIATES, INC.

Principal Place of Business	Mailing Address
929 WHASHINGTON AVE. MIAMI BEACH FL 33139	C/O SCHANTZ, SCHATZMAN 200 S. BISCAYNE BLVD. STE. 3650 MIAMI FL 33131 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/23/1993	3a. Date of Last Report: 04/29/1994
4. FEI Number: 65-0416132	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
7. This corporation has liability for assessable tax under s. 193.022, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CAHAN, RICHARD J. A 200 S BISCAYNE BLVD SUITE 3650 MIAMI FL 33131-2304	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
(Signature, type or printed name of registered agent and title if applicable) NOTE: Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1995	
TITLE	D	11 TITLE	☒ Change ☐ Addition
NAME	GIANCATERINI, MARCELLO	12 NAME	DIRECTOR
STREET ADDRESS	13200 POLO CLUB DRIVE, APT. A104	13 STREET ADDRESS	GIANCATERINI, MARCELLO
CITY-ST-ZIP	WPB FL 33414	14 CITY-ST-ZIP	929 Washington Avenue Miami Beach, FL 33139
TITLE	AS	21 TITLE	☐ Change ☐ Addition
NAME	CAHAN, RICHARD J	22 NAME	
STREET ADDRESS	200 S. BISCAYNE BLVD. #3650	23 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131	24 CITY-ST-ZIP	
TITLE	PS	31 TITLE	☐ Change ☐ Addition
NAME	CARLOS AMAYA,	32 NAME	
STREET ADDRESS	932 S.W. 20TH LANE	33 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33174	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Marcello Giancaterini June 21, 1995 305-674-9299
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER, OFFICER OR DIRECTOR — Date — Daytime Phone #

OF