

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000079783
 1. Entity Name
EURO-AMERICA TRANSLATIONS, INC.



Principal Place of Business Mailing Address
12245 S.W. 18TH TERRACE **12245 S.W. 18TH TERRACE**
MIAMI, FL 33175 **MIAMI, FL 33175**



04182008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0449322	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
LAMIGUEIRO-ESPINEL, MARIA
12245 S.W. 18TH TERRACE
MIAMI, FL 33175

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8. 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. I am familiar with, and accept the obligations of registered agent

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS LAMIGUEIRO-ESPINEL, MARIA 12245 SW 18TH TERRACE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT FERNANDEZ, MARIA DEL CARMEN 11032 SW 2ND ST MIAMI, FL
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Maria Lamigueiro Espinel* - MARIA LAMIGUEIRO ESPINEL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: *4/19/06* Daytime Phone #: *305-553-6850*