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• PROFIT
CORPORATION
• ANNUAL REPORT
1996

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

DOCUMENT # **P94000033728 (4)**

1. Corporation Name
EURO IMPACT, INC.

Principal Place of Business
1217 SW 13TH AVE
MIAMI FL 33135

Mailing Address
1217 SW 13TH AVE
MIAMI FL 33135

3. Date Incorporated or Qualified: 05/04/1994
3a. Date of Last Report: 06/15/1995

4. FEI Number: 65-0489220 [ ] 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

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes [ ] Yes [ ] No

2. Principal Place of Business
21 1217 SW 13 AVE
Suite, Apt. #, etc.
22
City & State
23 MIAMI FLORIDA
Zip 24 33135
Country 25 USA

2a. Mailing Address
26 P.O. BOX 450156
Suite, Apt. #, etc.
27
City & State
28 MIAMI FLORIDA
Zip 29 33245
Country 30 USA

9. Name and Address of Current Registered Agent
LOPEZ, MORAYMA A
1217 SW 13TH AVE
MIAMI FL 33135

10. Name and Address of New Registered Agent
81 Name MORAYMA LOPEZ
82 Street Address (P.O. Box Number is Not Acceptable) 1217 SW 13 AVE
83
84 City MIAMI FL 85 Zip Code 33135

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
Signature Typed or Printed Name of Registered Agent and Title if Applicable — (NOTE: Registered Agent signature required on this document) — DATE

12. OFFICERS AND DIRECTORS

TITLE	DPV	[ ] DELETE
NAME	RODRIGUEZ, ARTURO	
STREET ADDRESS	1217 SW 13TH AVE	
CITY-ST-ZIP	MIAMI FL 33135	
TITLE	DST	[ ] DELETE
NAME	LOPEZ, MORAYMA A	
STREET ADDRESS	1217 SW 13TH AVE	
CITY-ST-ZIP	MIAMI FL 33135	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	[ ] Change	[ ] Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	[ ] Change	[ ] Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	[ ] Change	[ ] Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	[ ] Change	[ ] Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	[ ] Change	[ ] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	[ ] Change	[ ] Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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)(k), 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: MORAYMA LOPEZ — 4/5/96 — 860-9818
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #