## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000059000 (7)

EUROPEAN AMERICAN SERVICE TEAM, INC.

Principal Place of Business
13151 SILVER FOX TRAIL
PALM BEACH GARDENS FL 33418

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc

13151 SILVER FOX TRAIL PALM BEACH GARDENS FL 33418

## FILED Apr 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Not Applicable

 Date Incorporated or Qualified 08/08/1994

65-0512146

5. Certificate of Status Desired

FEI Number

22		[27]							Fee	Hequired
City & State	alm Beach, FI	City & State					Election Campaign Financing Trust Fund Contribution			0 May Be
7(D	Country	Zip	Cour	ntrv						
コダスム	154	29	30	11. y			This corporation owes or has paid Personal Property Tax due June 30	· •	Yes	Intangible ☐ No
	9. Name and Address of Current		[30]				Name and Address of New Regis			<u> </u>
VOI	<del>*:`</del>	Thogas corou rigoth		B11	Name	10.	TOTAL MAN TO THE STATE OF THE S	10,04,		
	ESTLER, JOSEF H		L	82						
13189 SAND RIDGE RD PALM BEACH GARDENS FL 33418					Street Address (P.O. Box Number is Not Acceptable)					
PAL	M DEAUTI GARDENS FL 33418			83						
				٦						
			Ţ	84	City			FL	85 Zi	ip Code
de Diversion to	the provisions of Sections 607.0502	and COZ 1509 Florida Cta	tutos tho sh		named name	otion	n submits this statement for the nur		obongine	ito sociotor
office or re	gistered agent, or both, in the State of familiar with, and accept the obligations.	of Florida. Such change wa	is authorized	l by	the corporation	n's b	poard of directors. I hereby accept t	ne appo	ointment	as registere
SIGNATURE _										
	Ignature, typod or printed name of registered aguir OFFICERS AND			Ager	nl signature required			DATE	DIDECT	ODC IN 10
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4. I hereby ce	rtify that the information supplied wit	h this filing does not qualify	for the exer	noti	on stated in Se	ction	n 119.07(3)(i), Florida Statutes. I fur	her cer	tify that t	ne information
indicated o	n this annual report or supplemental irector of the corporation or the recei	annual report is true and a ver or trustee empowered t	ccurate and to execute th	tha is m	t my signature eport as requir	shall ed h	I have the same legal effect as if ma by Chapter 607, Florida Statutes: and	ade und n tedt b	ier oath; i iv name s	(nat I am an Ropears in
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