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

PROFIT CORPORATION ANNUAL REPORT 1999



DOCUMENT # DOMOGOT1591

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90029 024 ***150.00

Principal Place of Business Mailing Address 1052 WEST SAMPLE ROAD POMPANO BEACH FL 33064 US DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/29/1994 2. Principal Place of Business 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country Mailing Address DO NOT WRITE IN THIS SPACE DO NOT WRITE IN THIS SPACE 10 Not Applied For Not Applied For Not Applied For Source, Apt. #, etc. 10 Suite, Apt. #, etc. 11 Suite, Apt. #, etc. 12 Suite, Apt. #, etc. 13 Certificate of Status Desired 14 FEI Number 15 Certificate of Status Desired 15 Suite, Apt. #, etc. 16 Election Campaign Financing 17 St. 00 May Be Added to Fees 18 This corporation owes the current year Intangible	1. Corporation EURO EI	NTERPRISES, INC.	<i>701</i> 1301		₽¢.		
POMPANO BEACH FL 3084, POMPANO BEACH FL 3084 US Companies Pompanies Pom	Principal Place of Business Mailing Address						M 11981 81181 18181 1181 1881
Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 55°-054(0596 Not Applicable Not Applicable Not Applicable Not Applicable 55°-054(0596 Not Applicable Not	1052 WEST SAMPLE ROAD POMPANO BEACH FL 33064 POMPANO BEACH FL 33064					DO NOT WRITE IN THIS SE	PACE
Suite, Apt. #, etc.) - '	
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. S. Certificate of Status Desired Fee Required Fee Requi	Principal Place of Business 2a. Mailing Address) ··	Applied For
S. Certificate of Status Desired Fee Required City & State City & State City & State Section Campaign Financing S.0.00 May 8e Added to Fees Required Registered Regist	21		26				
City & State City & State City & State						5. Certifcate of Status Desired	
Zip Country Zip Country B. This corporation west the current year Intarapple Personal Property Tax. Yes No		•	City & State			6. Election Campaign Financing	\$5.00 May Be
Zip Country Zip Country 2ip Country 8, This corporation owes the current year Intangible Personal Property Tax. Yes No 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 11, Name 1052 WEST SAMPLE ROAD 1052 WEST S	23		28			. Trust Fund Contribution	Added to Fees
9. Name and Address of Current Registered Agent DESANTA, DONNA 1052 WEST SAMPLE ROAD POMPANO BEACH FL 33064 82 Street Address (P.O. Box Number is Not Acceptable) 83 S4 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 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, 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, 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, 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, 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, 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, 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, or both appointment agent and such appointment as registered agent, or both appointment as registered agent, or both appointment agent and such appointment agent are such appointment as registered agent, or both appointment agent and such appointment agent agent and such appointment agent age		Country	Zip	Cou	ntry		
DESANTA, DONNA 1052 WEST SAMPLE ROAD POMPANO BEACH FL 33064 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 807.0502 and 807.1508, 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 approximant as registered agent. I am familiar with and accept the obligations of, Syction 607.0505, Florida Statutes. SIGNATURE Signature, Type or presed earner and list ill application. TITLE D OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D DESANTA, DONNA 12. NAME DESANTA, DONNA 12. NAME DESANTA, DONNA 13. SIRRET ADDRESS CITY-ST-ZP POMPANO BEACH FL D DELETE 14. CITY-ST-ZP D DELETE 14. CITY-ST-ZP D DELETE 14. CITY-ST-ZP D DELETE 15. TITLE D Change Addition Addition DELETE 33. SIRRET ADDRESS CITY-ST-ZP DOMPANO BEACH FL D Change Addition Addition Change Addition Addition Addition Addition Addition D Change Addition Addition Addition Addition Addition ACITY-ST-ZP TITLE D Change Addition Addition Addition Addition ACITY-ST-ZP TITLE D Change Addition Addition Addition ACITY-ST-ZP Addition Addition ACITY-ST-ZP Addition ACITY-ST-ZP Addition ACITY-ST-ZP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition Addition ACITY-ST-ZP Addition ACITY-ST-ZP Addition ACITY-ST-ZP Addition ACITY-ST-ZP Addition ACITY-ST-ZP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ACITY-ST-ZP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ACITY-ST-ZP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFIC	24	25	29	30		. Grootian reporty	
DESANTA, DONNA : 1052 WEST SAMPLE ROAD POMPANO BEACH FL 33064 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, and armillar with end objections of Section 607.0505, Florida Statutes. SIGNATURE Signature, hydro or period caren of regulated upon and line flappication. (NOTE: Replaced Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE			nt Registered Agent			10. Name and Address of New Registered Ag	ent
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 agent, of 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	1052 WEST SAMPLE ROAD					ress (P.O. Box Number is Not Acceptable)	
SIGNATURE Signature, typide or printed name of registered agent and tile if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				، ـــــــــ م		·····································	1 1
TITLE UD DESANTA, DONNA DESANTA, DONNA STREET ADDRESS 1052 WEST SAMPLE ROAD TITLE DO DELETE TITLE TO DELETE TITLE TO DELETE TITLE TO Change TAddition TADDRESS TITLE TITLE TITLE TITLE TO Change TADDRESS TITLE TO Change TADDRESS TITLE TO Change TADDRESS TO Change TADDRESS TO CHANGE TO CHANGE		(LONNO VE	sauta			1-20-17	anging its registered nent as registered
NAME DESANTA, DONNA 1.2 NAME 1.3 STREET ADDRESS CITY-ST-ZIP DOMPANO BEACH FL DESANTA, FRANK DESANTA, FRANK 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 1.4 CITY-ST-ZIP DESANTA, FRANK 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE 1.3 TITLE Change Addition AMME STREET ADDRESS CITY-ST-ZIP TITLE NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.4 CITY-ST-ZIP TITLE DELETE Addition AMME Addition Change Addition Addition AMME AMME AMME AMME				_			
STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 14 CITY-ST-ZIP TITLE D DESANTA, FRANK 22 NAME STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 23 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 31 TITLE 32 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 33 STREET ADDRESS CITY-ST-ZIP TITLE ADDRESS ADDRESS ADDRESS CITY-ST-ZIP TITLE ADDRESS	TITLE #1		€ DELETE	1.1 77	π.E	L	Cuange
CiTY-ST-ZIP POMPANO BEACH FL 1.4 CITY-ST-ZIP TITLE D DELETE 2.1 TITLE Change Addition NAME DESANTA, FRANK 22 NAME 2.3 STREET ADDRESS CITY-ST-ZIP Change Addition STREET ADDRESS POMPANO BEACH FL DELETE 3.1 TITLE Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP Change Addition TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME Addition	NAME 1			1.2 NA	ME		
TITLE D DELETE 2.1 TITLE Change Addition NAME DESANTA, FRANK 2.2 NAME	7						
NAME DESANTA, FRANK 1052 WEST SAMPLE ROAD 2.3 STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL DELETE 3.1 TITLE Change Addition			☐ DELETE	_			☐ Change ☐ Addition
STREET ADDRESS 1052 WEST SAMPLE ROAD 2.3 STREET ADDRESS		₹		1	-		İ
CITY-ST-ZIP POMPANO BEACH FL 2.4 CITY-ST-ZIP TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME Addition Addition	·- ·		•				
TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CTTY-ST-ZIP Change Addition TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME Addition							ļ
NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME		· om · no outon · c	☐ DELETE	_			☐ Change ☐ Addition
3.3 STREET ADDRESS 3.4 CITY-ST-ZIP Change Addition A			_			•	
CITY-ST-ZIP 3.4.CITY-ST-ZIP ITILE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME	1	-		1			į
TITLE	1	•		1			
NAME 4.2 NAME			DELETE	_		<u> </u>	Change
	1			1		-	
						- Andrews - Allendary	<u> </u>

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

DELETE

DELETE

Daytime Phone #

Change

☐ Addition

Addition