

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000017417 (3)

1. Corporation Name

EUROSCOTLAND, INC.

FILED

96 MAR -5

SECRETARY OF STATE



Principal Place of Business

200 EAST BROWARD BLVD.
17TH FLOOR
FT. LAUDERDALE FL 33301

Mailing Address

200 EAST BROWARD BLVD.
17TH FLOOR
FT. LAUDERDALE FL 33301

3. Date Incorporated or Qualified
03/02/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

2a. Mailing Address

21 4051 N.W. 101st Drive

26 4501 N.W. 101st Drive

4. FEI Number
65-0560994

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

City & State

City & State

23 Coral Springs, FL 33065

28 Coral Springs, FL 33065

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24

25

29

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KATZ, THOMAS O
200 EAST BROWARD BLVD.
17TH FLOOR
FT. LAUDERDALE FL 33301

81 Name

Hudson, Matthew C.

82 Street Address (P.O. Box Number is Not Acceptable)

4051 N.W. 101st Drive

83

84 City

Coral Springs

FL

85 Zip Code

33065

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 this State, Florida, which 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

Matthew C. Hudson

(Signature of or certified name of registered agent and the applicable)

(NOTE: Registered Agent signature required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

☐ Change ☐ Addition

NAME Hudson, Matthew C.

11 TITLE

STREET ADDRESS 4051 N.W. 101st Drive

12 NAME

CITY-STATE-ZIP Coral Springs, FL 33065

13 STREET ADDRESS

TITLE ☐ DELETE

14 CITY-STATE-ZIP

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

21 TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

22 NAME

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

23 STREET ADDRESS

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

24 CITY-STATE-ZIP

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

25 TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

26 NAME

27 STREET ADDRESS

28 CITY-STATE-ZIP

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 or changes, or on an attachment with an address

SIGNATURE:

Matthew C. Hudson

(954) 340-5366

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)