ľ			iness Repo	ort (UBR)	FILED Apr 09, 2002 8:00 am
1. Entity Nar EUROEX	ne	# P9500	0066888		Apr 09, 2002 8:00 am Secretary of State 04-09-2002 91179 020 ***150.00 ₹
Principal Place of Business EUROEX INC 1402 LEE CT LAKE WORTH FL 33461			Mailing Address 1402 LEE COURT LAKE WORTH FL 33461 US		
2. Principal Place of Business EUROEX, INC. Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
315 7TH STREET CITY & State JUPI TER, FLORIDA		315 777 Lity & State JUPITER,	FLORIDA	4. FEI Number 65-0606495 Applied For Not Applicable	
3'544		Country USA and Address of Current F	33458	Country	5. Certificate of Status Desired 58.75 Additional Fee Required 7. Name and Address of New Registered Agent
FRANSAS 1402 LEE LAKE WO		461		Street Address	UKI FRANSAS s(P.O. Box Number is Not Acceptable) 7574 STREET PIDER FL ZipSocie458
SIGNATURE 9. This corpo Tax filing	Signature, types	y submits this statement for or printed name of registered agent a ible to satisfy its Intangible and elects to do so.	nd itile if applicable. (NO FILE NOW After May 1, 20		10. Election Campaign Financing \$5.00 May Be
11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FRANSAS 1402 LEE LAKE WO	COURT		12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE - NAME STREET ADDRESS CITY- ST-ZIP	-		Delete	TITLE NAME STREET ADDRESS CITY - ST- ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	TITLE NAME STREET AODRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS		<u> </u>	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
CITY-ST-ZIP		· •***	Delete	TITLE NAME STREET ADDRESS	Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ň			CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 13. I hereby of indicated of the cor	on this repor poration or th or on an atta	t or supplemental report is t receiver or trustee empoy chment with an address, w	true and accurate and that i vered to execute this report ith all other like empowered	r the exemption stated in S my signature shall have the as required by Chapter 60	Section 119.07(3)(i), Florida Statutes. I further certify that the information e same legal effect as if made under oath; that I am an officer or director of, Florida Statutes; and that my name appears in Block 11 or Block 12 if U - 1 - 02 561-281-3980