

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

FILED

May 13 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000068071 (6)

1. Corporation Name

EURO PINE IMPORTS CORPORATION

Principal Place of Business

XXXXXX  
XXXXXX  
US

Mailing Address

XXXXXX  
XXXXXX  
XXXXXX



2. Principal Place of Business

21 11112-5 San Jose Blvd.

Suite, Apt. #, etc.

22 Claire Lane Center

City & State

23 Jacksonville, FL

Zip

24 32223

Country

25 USA

2a. Mailing Address

26 P.O. Box 918

Suite, Apt. #, etc.

27

City & State

28 Orange Park, FL

Zip

29 32073

Country

30 USA

3. Date Incorporated or Qualified

09/05/1995

3a. Date of Last Report

04/02/1996

4. FEI Number

59-3334191

Applied For

Not Applicable

5. Certificate of Status Desired



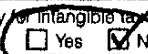
\$8.75 Additional  
Fee Required

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



9. Name and Address of Current Registered Agent

XXXX DAVID J. FERGUSON  
XXXX KINGSLEY AVE  
XXXX ORANGE PARK, FL 32073

10. Name and Address of New Registered Agent

81 Name

Phillip D. Yonge

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

83 5522 Oak Crossing Drive

84 City

Jacksonville,

FL

85 Zip Code

32244

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

Phillip D. Yonge, Registered Agent

Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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STREET ADDRESS

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CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5522 Oak Crossing Drive  
Jacksonville, FL 32244

14. I do 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 changes, or on an attachment with an address.

SIGNATURE: x

Phillip D. Yonge, President

Date

Daytime Phone #

0016263

CR2E034 (9/96)