FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000084331 (4)**

1. Corporation Name

EUROPEAN BODY WRAP INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
5200 N.W. 33RD AVE.. STE. 200 FT. LAUDERDALE FL 33309	5200 N.W. 33RD AVE.. STE. 200 FT. LAUDERDALE FL 33309

3. Date Incorporated or Qualified: **10/30/1995**

3a. Date of Last Report:

4. F.E.I. Number: 65-0616394 ☐ 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. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

VERDIER, GARY D
5200 N.W. 33RD AVE., STE. 200
FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	☐ DELETE
NAME	VERDIER, GARY D	
STREET ADDRESS	5200 N.W. 33RD AVE., STE. 200	
CITY-ST-ZIP	FT. LAUDERDALE FL 33309	
TITLE	VICE PRESIDENT	☐ DELETE
NAME	RICHARD L. KELLY	
STREET ADDRESS	4119 N. STATE RD SEVEN - STE 9125	
CITY-ST-ZIP	FT. LAUDERDALE FL. 33319	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	☒ Change ☐ Addition
	VERDIER, GARY D.	
21 TITLE	22 NAME	☐ Change ☒ Addition
31 TITLE	32 NAME	☐ Change ☐ Addition
41 TITLE	42 NAME	☐ Change ☐ Addition
51 TITLE	52 NAME	☐ Change ☐ Addition
61 TITLE	62 NAME	☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is absolutely false and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #