

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

FILED

Feb 18 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000013213 (9)

1. Corporation Name  
**EUROTECH SERVICES, INC.**



Principal Place of Business <b>2520 SW 16TH STREET #2 MIAMI FL 33145</b>	Mailing Address <b>2520 SW 16TH STREET #2 MIAMI FL 33145-2057</b>
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3. Date Incorporated or Qualified <b>02/12/1996</b>	3a. Date of Last Report
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2. Principal Place of Business 21 <b>20195 SW 316th Street</b> Suite, Apt. #, etc. 22 City & State 23 <b>Homestead, FL.</b> Zip 24 <b>33030</b>	2a. Mailing Address 26 <b>20195 SW 316th Street</b> Suite, Apt. #, etc. 27 City & State 28 <b>Homestead, FL.</b> Zip 29 <b>33030</b> Country 25 <b>U.S.A.</b> 30 <b>U.S.A.</b>
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4. FEI Number <b>65-0641122</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>LOPEZ, EURO J 2520 SW 16TH STREET #2 MIAMI FL 33145</b>	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	<b>20195 SW 316th Street</b>
83	
84 City	<b>Homestead</b>
85 FL	Zip Code <b>33030</b>

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	
NAME	LOPEZ, EURO J	1.2 NAME	
STREET ADDRESS	2520 SW 16TH STREET #2	1.3 STREET ADDRESS	20195 SW 316th Street
CITY - ST - ZIP	MIAMI FL 33145	1.4 CITY - ST - ZIP	Homestead, FL. 33030
TITLE	VTD	2.1 TITLE	
NAME	FUENTES, LAZARO R	2.2 NAME	
STREET ADDRESS	2520 SW 16TH STREET #2	2.3 STREET ADDRESS	20195 SW 316th Street
CITY - ST - ZIP	MIAMI FL 33145	2.4 CITY - ST - ZIP	Homestead, FL. 33030
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 changed by an attachment with an address.

SIGNATURE:

 EURO J. LOPEZ

2/15/97 (305)248-1240

CR2E034 (9/96)