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

 PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000101140 (7)

EURAM ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED May 19 1998 8:00am Secretary of State

(941) 596 1992

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3400 S. Tamiami Trail Suite 303 Sarasota fl 34239		3400 S. TAMIAMI TRAIL SUITE 303 SARASOTA FL 34239		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/16/1996					
21 716	<u>-</u>	2a. Mailing Address 26 7/6 WILL DEC	ER PLAC	E	4. FEI Number APPLIED FOR	5-0732876	Not	plied For LApplicable	
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desir	ea 🗀 .	Fee Rec		
City & State Za NAPLES FLORIDA Za NAPLES			FLORIDA	<i>)</i>	6. Election Campaign Financ Trust Fund Contribution		5.00 to Added to	o Fees	
Zip 34/0	18 25 COUNTRY	29 34/08 3	Country COLL/E	R	This corporation owes or leading to the Personal Property Tax due	June 30. 🔲 Ye	s 🗆	ngible No	
340 SU	9. Name and Address of Current R ENSCH, CHRISTOPHER P 00 S. TAMIAMI TRAIL ITE 303 RASOTA FL 34239	81 Nan 82 Stre 83 84 City	et Addre	10. Name and Address of NEHRISTIAN &. Sess (P.O. Box Number is Not Active April 1988) WAPLES	NE HAM	1ME	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 Portida, 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 objection 607.0505, Florida Statutes. SIGNATURE Signature, typed or prefet dearner of registered agent and tire if applicable. (NOTE: Registered Agent signature required when renstating) DATE									
12.	OFFICERS AND C		13.	noro require	ADDITIONS/CHANGES TO			3 IN 12	
TITLE	Ď	DELETE	1.1 TITLE	T	····		Change	Addition	
NAME	NEHAMMER, CHRISTIAN		1.2 NAME					[5	
STREET ADDRESS	15100 PORTS OF IONA DRIVE		1.3 STREET ADDRES	ss l					
CITY-ST-ZIP	FORT MYERS FL 33908		1.4 CITY-ST-ZIP						
TITLE	P	DELETE	2.1 TITLE	\neg			Change	☐ Addition	
NAME		IER	2.2 NAME	1				ļ	
STREET ADDRESS	CHRISTIAN NEHAMM	CE	2.3 STREET ADDRES	is l					
CITY-ST-ZIP	NAPLES FLODIZ	4 34108	2.4 CITY-ST-ZIP						
TITLE	<u> </u>	DELETE	3.1 TITLE				Change	Addition	
NAME			3.2 NAME			-	_		
STREET ADDRESS			3.3 STREET ADDRES	ss				1	
CITY-ST-ZIP			3.4, CITY-ST-ZIP						
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CITY-ST-ZIP			4.4 CITY-ST-ZIP						
TITLE		DELETE	5.1 TITLE	1-			Change	Addition	
NAME		-	5.2 NAME			-	-	·	
STREET ADDRESS			5.3 STREET ADDRES	ss					
CITY-ST-ZIP			5.4 CITY - ST - ZIP	~					
TITLE		DELETE	6.1 TITLE			П	Change	Addition	
NAME		مدينونو ليبي	6.2 NAME			٠ است			
-			6.3 STREET ADDRES	· .				}	
STREET ADDRESS				»					
CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for	6.4 CITY-ST-ZIP	aled in S	Section 119 07(3)(i) Florida Stat	ites. I further certify t	hal the	information	
indicated	on this annual report or supplemental aidirector of the corporation or the receive or Block 13 if changed, or on an attached	nnual report is true and accur	ate and that my	signature	e shall have the same legal effe	ct as if made under c	oath: thai	tlam an	