## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

Recorded to the second

## FILED Apr 23, 2004 8:00 am Secretary of State

DOCUMENT # P96000104017  1. Entity Name EURO AMERICAN INVESTORS GROUP USA, INC.				04-23-2004 90214 038 ***158.75					
Principal Place	of Business	Mailing Address			]				
4300 W. CYPRESS ST 4300 W. CYPRESS ST									
STE 1075	2502	STE 1075		1					
TAMPA, FL 3	3607	TAMPA, FL 33607			1 1888 (1881) (1881)		ATAN HATI AATAN ARF		1861 II (FB)
2. Principal Pl	ace of Business	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		04162004	Chg-P	CR2E0	34 (10/03)		
City & State	•	City & State		4. FEI Number 59-3418	219		— <u>⊢</u>	plied For t Applicable	
Zip	Country	Zip	Coun	itry	5. Certificate o	f Status Desired		\$8.75 Add Fee Required	
	6. Name and Address of Current	Registered Agent			7. Name and A	ddress of New	Registered #	Agent	
	. NONT INO			Name					
	MGMT INC YPRESS ST			Street Address (P.O. Box Number is Not Acceptable)					
TAMPA, FI	33607								
				City	FL Zip Code				
8. The above the obligati	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registere	d Agent signature require	d when reinstating)		DATE	<del> </del>	
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.									
10.	OFFICERS AND	DIRECTORS	11.			HANGES TO OF			
TITLE	EV	Delete	TITL		cutive 1				🔀 Addition
NAME	BURDGE, BRUCE D	75	NAM	E MODESS	nael E	Spiker	. Sui	te 101	5
STREET ADDRESS CITY-ST-ZIP			michael E. Spiker 4300 W. Cypress St., Suite 101 51-219 Tampa, FL 331007			•			
TITLE	PD	Delete	TITL	1.11	MODA F	T OOM	<del>)  </del>	Change	Addition
NAME	BESSEM, HERMAN	Control	NAM	. 1133	hall E	Spiker	·		, •
STREET ADDRESS	KONINGINNEGRACHT 7, 2514	AA DEN HAAG	STR		SOW C	Spiker 1 press	St. js	wite	1015
CITY-ST-ZIP	THE NETHERLANDS, OC		CITY	-ST-ZIP Ta	mpa, F	<u>L 504</u>	<u>01                                    </u>	·	
TITLE	P	☐ Delete	TITL		e Pres	aent		Change	Addition
NAME STREET ADDRESS	BESSEM, HERMAN 4300 W. CYPRESS ST., SUITE	1075	NAM	EET ADDRESS   4.24	main t	se Jac 1107855	THE C	vito	
CITY-ST-ZIP	TAMPA, FL 33607	1010			UMISA F		007		
TITLE	S	Delete	TITL	E CP.	retain		<u> </u>	☐ Change	☐ Addition
NAME	DE JAEGER, ROMAIN		. NAN	1 Hei	man be	essem	ch G	ا مانا	075
STREET ADDRESS	2514 AA DEN HAAG			EET ADDRESS 430	DOW C	Press !	الا (١٣٠	JUTE 1	6 10
CITY-ST-ZIP	THE NETHERLANDS,	<b>5</b>		r-SI-ZIP	mpa, F	3300			
TITLE NAME		☐ Delete	TITL Nam		>151001+2	secretic	10.0	Change	☐ Addition
STREET ADDRESS				IF Q	mwn b	press	<b>乳」Su</b>	ute in	วาร
CITY-ST-ZIP			CITY	r-ST-ZIP	min. #	E 336	01		
TITLE		☐ Delele	TITE	E	1-1			Change	Addition
NAME CTREET ADDRESS			NAM	I .					
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS (-ST-ZIP				•	
	L								

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

<b>SIGNAT</b>	URE:
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<b>GIGNAT</b>	THE AND TYPE	D OR PRINTED	NAME O	F SIGNIND	DFFICER OR I	RECTOR

4/20/04

813-353-8800

Daytime Phone #