4 24 98 B 5471 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000022167 (5) DOCUMENT #

EURO JAP CAR TECH INC

FILED Apr 24 1998 8:00am Secretary of State



X400-98 9549300

| Principal Place of Business Mailing Address | | | | | | | | | { | | | |
|---|------------------|-----------------------|--|---------------------|--|------------|---|-------------|---|--|-------------|--|
| 1372 N KILLIAN DR UNIT A 1372 N KILLIAN DR UNIT A | | | | | | | | | | | | |
| LAKE PARK FL 33403 LAKE PARK FL 33403 | | | | | | | | | | | | |
| | | | | | | | | | | DO NOT WRITE IN THIS SPACE | _ | |
| | | | | | | | | | | 3. Date Incorporated or Qualified 03/05/1997 | | |
| 2. Principal Place of Business | | | | | 2a. Mailing Address | | | | | 4. FEI, Number Applied For | 1 | |
| 21 | | | | Suite And # etc | | | | | | 05-014/534 Not Applicable | 4 | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | | | 5. Certificate of Status Desired Security Securi | | |
| City & State | | | | | City & State | | | | | 6. Election Campaign Financing \$5.00 May Be | ٦ | |
| 23 | | | | | 28 | | | | | Trust Fund Contribution | 1 | |
| Zip Country | | | untry | Zip Cou | | | ountry | / | | 8. This corporation owes or has paid the currept year Intangible | 7 | |
| 24 | 25 | | | 29 30 | | 30 | | | | Personal Property Tax due June 30. Yes No | | |
| 6 | g. Name | ered Agent | | | , | | 10. Name and Address of New Registere Agent | | | | | |
| ". NA | NU, HANS | | | | | | 81 | ١ | Name | | 1 | |
| 1372 N KILLIAN DR UNIT A | | | | | | | 82 | 5 | Street Addres | ss (P.O. Box Number is Not Acceptable) | ┧ | |
| LAKE PARK FL 33403 | | | | | | | 83 | ╁ | | | | |
| ζ, | | | | | | | 84 | - | Dity | ₽4 85 Zip Code | \dashv | |
| | | | | | | | | L | | FL s z code | ╛ | |
| office or r | registered ac | jent, or l | both, in the State of | Hori | i07,1508, Florida Statul da. Such change was f, Section 607, <mark>0505,</mark> Fl | authoriz | ed by | y th | named corpor ne corporation | ration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered | | |
| SIGNATURE | Sloosture typeri | or printed | name of registered agent ar | ad title | d andrebie INO | F: Registe | red And | ent s | signature required | when reinstaling) DATE | | |
| 12. | | , | OFFICERS AND D | | | 13 | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
| TITLE | 7 | | ·-··· | | DELETE | _ | TITLE | | | T _A Change Addition | $\exists :$ | |
| NAME | NAU, H | ans | | | | 1.2 | NAME | | | 4 | | |
| STREET ADDRESS 106 LEXINGTON PLACE | | | | | | | STREET | T ADI | ORESS | | Ì | |
| CITY-ST-ZIP | ROYAL | PALM | BEACH FL 33411 | | | 1.4 | CITY-S | 31 - Z | ZIP | | 18 | |
| TITLE | | | | | DELETE | 2.1 | TITLE | | | Change Addition | 70 | |
| NAME | | | | | | 2.2 | NAME | | | | 1 | |
| STREET ADDRESS | | | | | | 2.3 | STREET | T ADI | ORESS | | 1 | |
| CITY-ST-ZIP | | | | | | 2.4 | CITY-S | ST- | ZIP | | | |
| TITLE | | | | | ☐ DELETE | 3.1 | TITLE | | | Change Addition | 7 | |
| NAME | | | | | | 3.2 | NAME | | | | | |
| STREET ADDRESS | | | | | | 3.3 | STREET | r ADI | ORESS | | | |
| CITY-ST-ZIP | | | | | | 3.4 | CITY-S | ST- | ŽIP | | | |
| TITLE | | | | | DELETE | 4.1 | TITLE | | | Change Addition | 7 | |
| NAME | | | | | | 4. 2 | NAME | | | | 1 | |
| STREET ADDRESS | | | | | | 4.3 | STREET | ADI | ORESS | | | |
| CITY-ST-ZIP | | | | | | 4.4 | CITY-S | S1-Z | ZIP | | ╛ | |
| TITLE | | | | | DELETE | 5.1 | TITLE | | | ☐ Change ☐ Addition | 7 | |
| NAME | | | | | | 5.2 | NAME | | | | | |
| STREET ADDRESS | | | | | | 5.3 | STREET | AD! | ORESS | | | |
| CITY-ST-ZIP | | | | | | 5.4 | CITY-S | S1-Z | ZIP | | | |
| TITLE | | | | | ☐ DELETE | _ | TITLE | | | Change Addition | ٦ | |
| NAME | | | | | | 6.2 | NAME | | | | | |
| STREET ADDRESS | | | | | _ | 6.3 | STREET | T ADI | ORESS | | | |
| CITY-ST-ZIP | | | | | | | CITY-S | | | | | |
| 14. I hereby o | certify that th | e inform | ation supplied with | this | iling goes not chally | or the e | xemp | otio | n stated in Se | ection 119.07(3)(i), Florida Statutes. I further certify that the information | 1 | |
| indicated officer or | on this annu | ial repor ie obros | t or supplemental a lation or the receive | nnua er ow | il report is ture and acc | execute | na this Lithis | at r rer | my signatur e port as re <i>g</i> uir | shall have the same legal effect as if made under oath; that I am an add by Chapter 607, Florida Statutes; and that my name appears in | | |