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 # P97000031143 (5)

EURODOLL USA, INC.

| Principal Place of Business | | | | | | | | | |
|-----------------------------|----|------|-----|-------|-----|--|--|--|--|
| 621 | NW | 53RD | ST. | SUITE | 240 | | | | |

Mailing Address

FILED May 15 1998 8:00am Secretary of State



| 621 NW 53RD ST. SUITE 240 BOCA RATON FL 33487 | | 621 NW 53RD ST. SUITE 240 BOCA RATON FL 33487 | | | | | | | |
|--|--|---|---|----------|---------------|--|--------------------------------|-----------------------|--|
| | | | | | | DO NOT WRITE IN THIS SE | 'ACE | | |
| | | | | | | 3. Date Incorporated or Qualified 04/07/1997 | | | |
| 2. Principal Pi | ace of Business | 2a. Mailing Address | | | | 4. FEI Number | Ar | oplied For | |
| 21 | | 26 | | | | 59-3444079 | No | ot Applicable | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | Additional equired | |
| City & State | | City & State | | | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | | |
| Zip | Country | Zip | Cour | ntry | | 8. This corporation owes or has paid the curre | · - | _ ~ | |
| 24 | 25 Name and Address of Curren | 29 Registered Agent | 30 | | | Personal Property Tax due June 30. 10. Name and Address of New Registered As | |] No | |
| 146 | | Trogratorou Agont | | 81 | Name | (8) Paulio dito Addioda of fron Hogistellou A | ,0111 | | |
| | NE, PAUL C | | | | | | | | |
| |)1 \$ Kirkman RD, suite 500 Lando FL 32819 | | | 82 | Street A | Address (P.O. Box Number is Not Acceptable) | | | |
| . | | | | 83 | · | | | | |
| | | | - | 84 | City | FL | 85 Zip | Code | |
| 11. Pursuant I | to the provisions of Sections 607.0502 | and 607 1508, Florida Statut | es, the ab | ove- | named c | corporation submits this statement for the purpose of c | hanging il | s registered | |
| agent. I a | egistered agent, or both, in the State m <mark>fam</mark> iliar with, and accept the obliga | or Florida. Such ch ange w as a trons of, Section <mark>607,0505, Fl</mark> o | autnorized ori <mark>da</mark> Statu | ites. | tne corpo | oration's board of directors. I hereby accept the appoi | ntment as | registered | |
| SIGNATURE | Signature, typed or printed name of registined age. | raid atterfapplicable (NO3) | E. Registored | Agen | : signature n | equired when reinsteting) DATE | | | |
| 12. | OFFICERS AND | DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND D | DIRECTOR | RS IN 12 | |
| TITLE | Ō | DEL€TE | 1.1100 | ı.E | | | Change | ☐ Addition | |
| NAME | Simon, Kunwar a | | 1.2 NAI | ME | | | | | |
| STREET ADDRESS | GEEREN 29-31 D-28195 BREM | AEN | 1.3 STF | REET A | DDRESS | | | | |
| CITY-ST-ZIP | GERMANY | | 1.4 CIT | Y-ST- | - ZIP | | | | |
| TITLE | D | DELETE | 2.1 TITL | LF. | | | Change | Addition | |
| NAME | SUDERBERG , GUDRUN | | 2.2 NAJ | ME | | · · · · · · · · · · · · · · · · · · · | | | |
| STREET ADDRESS | GEEREN 29-31 D-28195 BREN | 1EN | 2.3 STR | IFET A | DDRFSS | | | | |
| CITY-ST-ZIP | GERMANY | | 2 4 CI | Y-ST | - 7IP | | | | |
| TITLE | - | ☐ DELETE | 3 1 1/18 | .E | | | Change | ☐ Addition | |
| NAME | | | 3 2 NA | ME | - 1 | | | | |
| STREET ADDRESS | | | 3 3 STR | IEET A | DDRESS | | | | |
| CITY-ST-ZIP | | | 3 4. CIT | Y - ST | - ZiP | | | | |
| TITLE | | ☐ DELETE | 4 1 T(T) | LE | T | | Change | ☐ Addition | |
| NAME | | | 4. 2 NA | ME | | | | | |
| STREET ADDRESS | | | 4.3 STR | EET A | DDRESS | | | | |
| City-St-ZIP | | · · · · · · · · · · · · · · · · · · · | 4.4 CIT | Y- \$1- | ZIP | | | | |
| TITLE | | ☐ DELETE | 517111 | LE | | | Change | ☐ Addition | |
| NAME | | | 5 2 NA | ME | | | | | |
| STREET ADDRESS | | | 5.3 S1R | EET A | DORESS | | | 1 | |
| CITY-ST-ZIP | | | 5.4 CIT | Y - S1 - | ZIP | | | | |
| TITLE | | ☐ DELFTE | 61 Till | .E | | | Change | Addition | |
| NAME | | | 6.2 NAM | ME | | | | | |
| STREET ADDRESS | | | 6.3 STR | EE1 A | DDRESS | | | | |
| CITY-ST-ZIP | | | 6.4 CIT | | | | | | |
| indicated officer or o | on this annual report or supplemental | Lannual réport is true ánd á cc iver or trustee emp owered to e | urate and | that | my sign | d in Section 119.07(3)(i), Florida Statutes. I further certi- lature shall have the same legal effect as if made unde required by Chapter 607, Florida Statutes; and that my | er oath; tha | atlam an 📗 | |