

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
PAYMENT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

APPROVED
AND
FILED

98 DEC -4 PM 5:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000058220
1. Corporation Name
EURO/FLORIDA FUNDINGS, INC.

Principal Place of Business
see below

Mailing Address
see below

2. Principal Place of Business
21 1331 Old Oak Lane
Suite, Apt. #, etc.
22
City & State
23 Naples, FL
Zip
24 34100
Country
25 USA

2a. Mailing Address
26 1331 Old Oak Lane
Suite, Apt. #, etc.
27
City & State
28 Naples, FL
Zip
29 34100
Country
30 USA

9. Name and Address of Current Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City

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 the registered agent under Florida Statutes.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable
Lawrence J. Chastang
DATE
11/30/98

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PRESIDENT	MICHAEL BAHMS	1331 Old Oak Lane	Naples, FL 34100
VICE PRESIDENT, SECRETARY	PETRA BAHMS	1331 Old Oak Lane	Naples, FL 34100

14. 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 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, or on an attachment with an address.

SIGNATURE: Michael Bahms
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REINSTATEMENT 98

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
7/3/1997

4. FEI Number
65-0856835

5. Certificate of Status Desired
\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution
\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
Yes No

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City

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 the registered agent under Florida Statutes.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable
Lawrence J. Chastang
DATE
11/30/98

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

14. 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 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, or on an attachment with an address.

SIGNATURE: Michael Bahms
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR