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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998	No. of the last
DOCUMENT 1. Corporation Name	# P9700068354

NEW EUROPE CHOCOLATES, INC. 727 North Drive Suite K Melbourne, Florida 32934

Principal Place of Business

Mailing Address

727 North Dr Suite K

FILED Oct 06 1998 8:00am Secretary of State

AMENDED"

DO NOT WRITE IN THIS SPACE

	· 						
Melbourne, FL 32934				3. Date Incorporated or Qualified 08/06/97			
2.	Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For			
21		26 727 North Drive		re 59-3464460 Not Applicable			
22	Suite, Apt. #, etc.	Sulte, Apt. #, etc. 27 Suite K		5. Certificate of Status Desired Sec. 75 Additional Fee Required			
23	City & State	City & State Melbourne, Florida		6. Election Campaign Financing \$5.00 May Be			
24	Zip Country	Zip Cour 29 32934 30 US	ntry	fry 8. This corporation owes or has paid the current year Intangible			
	9. Name and Address of Current		10. Name and Address of New Registered Agent				
Margaret M Winschel 460 Roosevelt Avenue			81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83				
		-	84	34 City 85 Zip 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 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, Section 607,0505, Florida Statutes.

SIGNATURE							
	Signature, typed or printed name of registered agent and title if applicable	e (NOTE: Ri	upistered Ageni signature	required when reinstating)		ATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHAI	NGES TO OFFICERS		
TITLE		DELETE	1.1 TITLE	P/D		Change	Addition
NAME		1	1.2 NAME	HAROLD D. G	UNDERSEN		
STREET ADDRESS		3	1.3 STREET ADDRESS	1166 HEALEY	COURT		
CITY-ST-ZIP			1.4 CITY-ST-ZIP	SANTA ROSA,	CA 9540		
TITLE		DELETE	2.1 TITLE	EXEC VP/D		K Change	Addition
NAME			2.2 NAME	DRAZEN EMAN	UEL PREMA	TE	
STREET ADDRESS			2.3 STREET ADDRESS	1041 REGENC	Y DRIVE		
CITY-ST-ZIP			2.4 CITY-ST-ZIP	MELBOURNE.	FLORIDA	32935	
TITLE	S/T/D	DELETE	3.1 THILE			Change	☐ Addition
NAME	MARGARET M. WINSCHEL		3.2 NAME		002657		
STREET ADDRESS	460 ROOSEVELT AVENUE		3.3 STREET ADDRESS	-10/07	'/9801020	0 2 3	
CITY-ST-ZIP	SATELLITE BEACH, FLORI	DA 32937	3.4. CITY - \$1 - ZIP	*** <u>F</u>	25		
TITLE		DELETE	4.1 TITLE			□ /Z pange	didition
NAME			4. 2 NAME			1 /L 1/	1/1
STREET ADDRESS			4.3 STREET ADDRESS				16
CITY-ST-ZIP			4.4 CITY+ST-ZIP				()
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		DELETE	O.1 TITLE			Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				ľ
OUT . CT 210			0.4 CITY - CT - 710				į.

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.

MARCARET IN WINSCHEL 9/20/98 407-951-0036