

May 04, 2006 08:00 Al Secretary of State DOCUMENT # P97000076225 1. Entity Name EURASIA IMPORTS, INC. Principal Place of Business Mailing Address 5143 COMMERCIAL WAY 5143 COMMERCIAL WAY SPRING HILL, FL 34606 SPRING HILL, FL 34606 04242006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE. Applied For 4. FEI Number 59-3470369 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE WYCKOFF, RICHARD F 5143 COMMERCIAL WAY SPRING HILL, FL 34606 IN THIS SPACE 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS DPST TITLE WYCKOFF, RICHARD F NAME STREET ADORESS 5143 COMMERCIAL WAY SPRING HILL, FL 34606 CITY-ST-ZIP TITLE |05/22/06-80002-005|150.00 WYCKOFF, SHARON A NAME STREET ADDRESS 5143 COMMERCIAL WAY SPRING HILL, FL 34606 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-S1-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

SNATURE AND TYPED OR PRINTED PAME OF STANING OFFICER OR DIRECTOR

RICHARD WYCKOFF

×04/30/06 771-364 650

Daylime Phone #

FILED