restalz

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 297000080367 1. Entity Name				FILED			
Eurosoft COrporation '				01 JUL 16 PM 2:18			
Principal Place of Business	Place of Business Mailing Address			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business	~						
703 Lucerne Avenue	3. Mailing Address Same						
Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
Suite 201 City & State	City & State			4. FEI Number Applied For			For
Lake Worth, FL				22-3538310	• •	Not Appi	
Zip Country 33460 IISA	Zip			5. Certificate of Status Des	ired 🔲	\$8.75 Additional Fee Required	
6. Name and Address of Current	Registered Agent		Name	7. Name and Address of N	lew Registered	Agent	
William H. Luckman			Stephen H. Durland				
777 South Flagfer Drive			Street Address (P.O. Box Number is Not Acceptable) 232-A Royal Palm Wayo				
8th Floor, West Tower							
West Palm Beach, F1 33401 City Palm Beach FL 730.000						Zin Code 33480_	
8. The above named entity submits this statement for	r the purpose of changing its r	egistele	d office or register	ed agent, or both, in the State	of Florida.	723 1002.	
SIGNATURE	Du	> '	\				
Signature typed of pribate rame of registered agent	and little if applicable. (NOTE:	Registerau	Agent signature required	when reinstating)	DATE		-
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	After MAY \$200 Make Check Payable	Teo w	dii be \$550.00 k	10. Election Campaig Trust Fund Contri		\$5.00 May Added to Fee	
11. OFFICERS AND		12.	- Ω,	ADDITIONS/CHANGES TO	OFFICERS AND		
MAME William H. Luckman 703 Lucerne Avenue Lake Worth, FL 334	Delete	NAME	ADDRESS 33.	S.A. Royal A	In way	Change □ Ad	CR2E034 (11/00)
TITLE	Delete _	TITLE	11-21	FAIn Vent	1 Wrich	☐ Change ☐ A	ddition 2
NAME STREET ADDRESS CITY-ST-ZIP		NAME	ADDRESS T-ZIP			G Grangs G	Ö
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NAME STREET ADDRESS CHY-ST-2HP		NAME	ADORESS 1-zip	000	0044		_ _
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NAME STREET ADDRESS		NAME	ADDRESS				ļ
CITY-ST-ZIP		CITY-S	ADDRESS T-ZIP			JMW L	/
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NAME STREET ADDRESS		NAME STREET	ADDRESS			\mathcal{O}_0	
CITY-ST-ZIP		CITY-ST	1				
13. 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 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 shappedred to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.							
SIGNATURE: SIGNATURE AND TWEEP OF PRINTED SAME OF SIGNING OFFICER OR DIRECTOR WHILLY MAN 4/25/01 561-540-588							





ACCOUNT NO. : 072100000032

REFERENCE

4372512

AUTHORIZATION

COST LIMIT

\$300.00

ORDER DATE: May 2, 2001

ORDER TIME : 9:33 AM

ORDER NO. :

136555-005

CUSTOMER NO:

4372512

CUSTOMER: Gregg E. Jaclin, Esq Anslow & Jaclin, Llp

Freehold Executive Center

4400 Route 9 South, 2nd Floor,

Freehold, NJ 07728

DIVISION OF CORPORATION

DOMESTIC FILINGS

NAME:

EUROSOFT CORPORATION

REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

PLAIN STAMPED COPY XX

CONTACT PERSON: Darlene Ward

EXAMINER'S INITIALS