

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000082435

FILED
Mar 08, 2005
Secretary of State

Entity Name: EUROPEAN RESTORATIONS, INC.

Current Principal Place of Business:

915 NW 1ST AVE, #2501
MIAMI, FL 33136

New Principal Place of Business:

915 NW 1ST AVE
H2501
MIAMI, FL 33136

Current Mailing Address:

915 NW 1ST AVE, #2501
MIAMI, FL 33136

New Mailing Address:

915 NW 1ST AVE
H2501
MIAMI, FL 33136

FEI Number: 65-0866825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STENSON, JOLANTA
915 NW 1ST AVE, #2501
MIAMI, FL 33136 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: STENSON, JOLANTA
Address: 915 NW 1ST AVE, #2501
City-St-Zip: MIAMI, FL 33136

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: STENSON, JOLANTA
Address: 915 NW 1ST AVE, APT. #H2501
City-St-Zip: MIAMI, FL 33136

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOLANTA SENSON

PSD

03/08/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date