1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P98000090331

2. Principal Place of Business

Suite, Apt. #, etc.

EURO IMPORTS CORPORATION

Principal Place of Business	Mailing Address
11349 SOUTH ORANGE BLOSSOM TRAIL	11349 SOUTH ORANGE BLOSSOM TRAIL
SUITE B-105	SUITE B-105
ORLANDO FL 32837	ORLANDO FL 32837

2a. Mailing Address

Suite, Apt. #, etc.

26

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90200 031 ***150.00



Applied For

\$8.75 Additional

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

10/22/1998

2		27				5. Certificate of Status Desired
City & State		City & S	State			6. Election Campaign Financing S5.00 May Be
3		28				Trust Fund Contribution Added to Fees
Zíp	Country	Zip		Country		8. This corporation owes the current year Intangible
4	25	29	30	5		Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Current R	<u> </u>	jent	'		10. Name and Address of New Registered Agent
				81	Name	
WHITESIDE, JON D 11349 SOUTH ORANGE BLOSSOM TRAIL				82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
				02	Sileet Ad	daless (1.0. box Hallist, 10. H
SUITE B-105 ORLANDO FL 32837			83			
			84	City	85 Zip Code	
			04	City	FL 63 25 5000	
office or regi agent. I am	the provisions of Sections 607.0502 a istered agent, or both, in the State of familiar with, and accept the obligation gnature, typed or printed name of registered agent are	Florida. Such ns of, Section	change was autr 607.0505, Florida	orized by a Statutes.	tne corpora	orporation submits this statement for the purpose of changing its register ation's board of directors. I hereby accept the appointment as registered pured when reinstating) DATE
12.	OFFICERS AND			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN
TITLE	President		☐ DELETE	1.1 TITLE		Change A
NAME	Jon D. Whitesid	.e		1.2 NAME		
STREET ADDRESS	13957 Osprey Li	nks Rd	#98	1.3 STREET	T ADDRESS	
CITY-ST-ZIP	Orlando, FL 328			1.4 C/TY-\$	T-ZIP	
TITLE	Vice Pres/Treas		DELETE	2.1 TITLE		Change A
NAME	Christina C. Wh		le	22 NAME		
STREET ADDRESS	13957 Osprey li			2.3 STREET	TADORESS	
CITY-ST-ZIP	Orlando, FL 328			2.4 CITY-S	ST-ZIP	
TITLE	James E. Raffer		☐ DELETE	3.1 TITLE		☐ Change ☐ Ar
NAME	Vice Pres	-1		3.2 NAME		
STREET ADDRESS	42 Johnson Ct.			3.3 STREET	TADDRESS	
CITY-ST-ZIP	Paramus, NL 076	42		3.4. CITY- S	ST-ZIP	
TITLE	Taramas, NE 070	7 4	☐ DELETE	4,1 TITLE		☐ Change ☐ A
NAME				4, 2 NAME		
				4.3 STREET	TADDRESS	
STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP				4.4 CITY-S	T-ZiP	
CITY-ST-ZIP			☐ DELETE	51 TITLE	T-ZiP	Change A
CITY-ST-ZIP			☐ DELETE	51 TITLE 5.2 NAME		Change A
TITLE			☐ DELETE	51 TITLE 5.2 NAME 53 STREET	T ADDRESS	Change A
CITY-ST-ZIP TITLE NAME				5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S	T ADDRESS	:
CITY-ST-ZIP TITLE NAME STREET ADDRESS			☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE	T ADDRESS	Change A
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 6.2 NAME	T ADDRESS T-ZIP	:
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 6.2 NAME	T ADDRESS T-ZIP T ADDRESS	:

officer or director of the corporation or the Block 12 or Block 13 if changed, or on any

SIGNATURE: