2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000058198

Entity Name: EURO XVII, INC.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4300 W CYPRESS STREET **SUITE 1075** TAMPA, FL 33607 **Current Mailing Address: New Mailing Address:** 4300 W CYPRESS STREET **SUITE 1075** TAMPA, FL 33607 FEI Number: 59-3589075 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AMEURCO MANAGEMENT, INC. 4300 W CYPRESS STREET **SUITE 1075** TAMPA, FL 33607 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition MARTOJO, TOM Name: Name: VAN DER EEMS, DIRK 4300 W CYPRESS STREET, SUITE 1075 4300 W CYPRESS STREET, SUITE 1075 Address: Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA FL 33607 Title: VΡ Title: () Delete (X) Change () Addition VAN OMMEN, NICK Name: Name: SPIKER, MICHAEL E 4300 WEST CYPRESS STREET, SUITE 1075 4300 WEST CYPRESS STREET, SUITE 1075 Address: Address: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33607 City-St-Zip: Title: () Delete (X) Change () Addition Title: MOBACH, MICHAEL SPIKER, MICHAEL E Name: Name: 4300 W. CYPRESS ST., STE 1075 4300 W. CYPRESS ST., STE 1075 Address: Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33607 Title: VΡ (X) Delete Title: () Change () Addition WILKIE, MARK S Name: Name: Address: 4300 WEST CYPRESS ST SUITE 1075 Address: City-St-Zip: TAMPA, FL 33607 US City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: WILKIE, MARK S Name: 4300 WEST CYPRESS ST SUITE 1075 Address: Address: City-St-Zip: TAMPA, FL 33607 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MICHAEL E SPIKER VP 04/28/2008