


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90214 030 ***158.75

DOCUMENT # P99000075783 1. Entity Name EURO XIX, INC.					
Principal Place of Business 4300 W CYPRESS STREET STE 1075 TAMPA, FL 33607			Mailing Address 4300 W CYPRESS STREET STE 1075 TAMPA, FL 33607		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-3608427	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent AMEURCO MANAGEMENT, INC. 4300 W CYPRESS STREET STE 1075 TAMPA, FL 33607				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE D NAME BESSEM, HERMAN STREET ADDRESS 4300 W CYPRESS STREET STE 1075 CITY - ST - ZIP TAMPA, FL 33607	<input checked="" type="checkbox"/> Delete		TITLE President NAME Herman Bessem STREET ADDRESS 4300 W. Cypress St., Suite 1075 CITY - ST - ZIP Tampa, FL 33607	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE DEVP NAME BURGE, BRUCE D STREET ADDRESS 4300 W CYPRESS STREET STE 1075 CITY - ST - ZIP TAMPA, FL 33607	<input checked="" type="checkbox"/> Delete		TITLE Executive VP NAME Michael E. Spiker STREET ADDRESS 4300 W. Cypress St., Suite 1075 CITY - ST - ZIP Tampa, FL 33607	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE P NAME BESSEM, HERMAN STREET ADDRESS KONINGINNEGRACHT 7 2500 BJ DEN HAAG CITY - ST - ZIP THE NETHERLANDS,	<input checked="" type="checkbox"/> Delete		TITLE VP NAME Romain De Jaeger STREET ADDRESS 4300 W. Cypress St., Suite 1075 CITY - ST - ZIP Tampa, FL 33607	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE S NAME DEJAQUES, ROMAIN STREET ADDRESS KONINGINNEGRACHT 7-2514 DEN HAAG CITY - ST - ZIP THE NETHERLANDS,	<input checked="" type="checkbox"/> Delete		TITLE Secretary NAME Herman Bessem STREET ADDRESS 4300 W. Cypress St., Suite 1075 CITY - ST - ZIP Tampa, FL 33607	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE Assistant Secretary NAME Romain De Jaeger STREET ADDRESS 4300 W. Cypress St., Suite 1075 CITY - ST - ZIP Tampa, FL 33607	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE Treasurer NAME Michael E. Spiker STREET ADDRESS 4300 W. Cypress St., Suite 1075 CITY - ST - ZIP Tampa, FL 33607	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
12. 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 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: <i>Mercedes S. Sosa</i>			Date 4/30/04 Daytime Phone # 813-353-8800		