## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # P99000079971**

**EUROPEAN WOODART CORPORATION** 



Principal Place of Business

1315 E INTERNATIONAL SPEEDWAY BLVD DELAND, FL 32724

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## **FILED** Mar 15, 2004 08:00 AM Secretary of State



03102004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3608752

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BOITCHOUK, VASSILI 412 MARYLAND TERRACE

## DO NOT WRITE

DELAND, FL 32724			IN THIS SPACE		
8. The above the obligat	ions of registered agent.	urpose of changing its registered	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title it	applicable (NOTE Registered	Agent signature	required when reinstating)	3TAG
Fil. After M:	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10. Title Name Street address City-St-Zip	P BOITCHOVK, VASSILI 1961 PARAGON ST DELTONA, FL 32738	TORS }			U00000088626 03/15/04-80059-014 150.00
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME					03/15/04-80059-014 150.00
STREET ADDRESS CITY-ST-ZIP					NOT WRITE
ittle Name Street address City-St-Zip				IN T	THIS SPACE
ritle Name Street address City-St-Zip					
title Name Street Address City-St-Zip					

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 exprowered.

SIGNATURE:

ME OF SIGNING OFFICER OR DIRECTOR

03.11.2004