

Attachment



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1-25-01

12568

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 16, 2001

PRE-PAID INTERNET CARDS, INC.
28000 SPANISH WELLS BLVD
BONITA SPRINGS, FL 34135

SUBJECT: PRE-PAID INTERNET CARDS, INC.
Ref. Number: P99000080806

Thank you for your letter of July 3, 2001, which has been forwarded to me for response.

List the street address of each officer/director listed on the report or on an attachment.

The signature(s) on the report must be original and in ink. A photocopy or stamped signature is not acceptable.

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Kathy Ashton
Document Specialist

Letter Number: 301A00041740

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000080806

1. Entity Name

E-PAID INTERNET CARDS, INC.

Principal Place of Business

28000 SPANISH WELLS BLVD
BONITA SPRINGS FL 34135

Mailing Address

28000 SPANISH WELLS BLVD
BONITA SPRINGS FL 34135

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

55-3606343

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

EURO-AMERICAN FINANCIAL SERVICES, INC.
28000 SPANISH WELLS BLVD
BONITA SPRINGS FL 34135

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

its corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Delete
NAME D
STREET ADDRESS EBBINGHAUS, MARK
CITY-ST-ZIP 9275 BONITA BEACH ROAD SE
BONITA SPRINGS FL 34135

TITLE ☐ Change ☒ Addition
NAME D.P.T. &
STREET ADDRESS JEFF GOLDBLUM
CITY-ST-ZIP TEL AVIV

TITLE ☒ Delete
NAME P
STREET ADDRESS AMBURN, JAMES W
CITY-ST-ZIP 28000 SPANISH WELLS BLVD
BONITA SPRINGS FL 34135

TITLE ☐ Change ☒ Addition
NAME S
STREET ADDRESS JUERGEN BECKL
CITY-ST-ZIP OTTO HAHN STR 10
63477-MAINFAL-GERMANY

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Attachment

RECEIVED

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12568

DO NOT WRITE IN THIS SPACE

040630

CR2E034 (10/00)

Attachment Doc # P99000080806 12568
EURO-AMERICAN FINANCIAL SERVICES, INC.

www.Euro-American.com

JAMES W. AMBURN, President

28000 Spanish Wells Boulevard
Bonita Springs, Florida 34135
e-mail: vgerhards@Euro-American.com



Telephone (941) 992-3355
Fax (941) 992-1669
Toll Free (800) 649-4661

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

July 3, 2001

RE: Pre-Paid Internet Cards, Inc.
P 99000080806

To Whom It May Concern:

Today we received a reminder for the above-mentioned Uniform Business Report.

We have filed the report with the fee for \$ 150.00 on April 19th, 2001.

Enclosed please find a copy of the report and the cancelled check.

If we can be of further assistance, please do not hesitate to contact us.

Yours sincerely,

Marena Loeffler
Euro-American Financial Services, Inc.

Attachment Doc # P99000080806 1268

THIS DOCUMENT HAS A COLORED BACKGROUND & MICROPRINTING. THE REVERSE SIDE OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK.

Euro-American Financial Services, Inc.
 28000 Spanish Wells Blvd.
 Bonita Springs, FL 34135
 941-992-3355

Northern Trust Bank of Florida N.A.
 Naples, Florida

537953 12328

63-985 / 980

04/19/2001

PAY TO THE ORDER OF Florida Dept. of State

\$ 150.00

One Hundred Fifty and 00/100 *****050354334 2123 2476 00 05-02-01*****

Florida Dept. of State

010262543 0391 1519 06 05-02-01

050354334 2123 2476 00 05-02-01

MEMO Pre-Paid Internet Cards P99000080806

AUTHORIZED SIGNATURE

012328 066009650 2010010849

0000015000

066000109
 050354334
 050354334 05-02-01

066000109 TRUNCATION
 050354334
 050354334 05-02-01

BANK OF AMERICA, NA JAX
 0630000474 2253 98 P10
 05/01/01

6040487214

APR 25 2001
 61955

DO NOT WRITE IN THESE SPACES
 RESERVE FOR FINANCIAL INSTITUTIONS ONLY

DEPARTMENT OF STATE
 FOR DEPOSIT ONLY
 ACCT # 1009068796