

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthern
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S57629 (5)

1. Corporation Name

EUROPEAN INVESTMENT HOLDINGS, INC.

Principal Place of Business

**1800 BARNETT TOWER
701 BRICKELL AVE
MIAMI FL 33131**

Mailing Address

**801 BRICKELL AVENUE
SUITE 1301
MIAMI FL 33131
US**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**HUDSON, ROBERT F
701 BRICKELL AVE
SUITE 1800
MIAMI FL 33131**

3. Date Incorporated or Qualified

06/06/1991

3a. Date of Last Report

04/29/1994

4. FEI Number

65-0273050

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 190.012?

Florida Statutes

☐ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

John S. Sullivan

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

**801 Brickell Avenue
Suite 1301**

84 City

Miami

FL

85 Zip Code

33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

John S. Sullivan, Director

(305) 381-8340

12. OFFICERS AND DIRECTORS

TITLE

OPS

NAME

SULLIVAN, JOHN S

STREET ADDRESS

801 BRICKELL AVE #1301

CITY ST ZIP

MIAMI FL

TITLE

AS

NAME

HUDSON, ROBERT F

STREET ADDRESS

701 BRICKELL AVE

CITY ST ZIP

MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY ST ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY ST ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY ST ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY ST ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY ST ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY ST ZIP

☐ Change

☐ Addition

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☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John S. Sullivan

4-18-95

(305) 381-8340

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number