

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V51707
 1. Entity Name
 EUROIMAGE, INC.



FILED
Jun 19, 2008 08:00 AM
Secretary of State

Principal Place of Business
 913 DIPLOMAT PARKWAY
 HALLANDALE, FL 33009 US

Mailing Address
 913 DIPLOMAT PARKWAY
 HALLANDALE, FL 33009 US



06132008 No Chg-P CR2E034 (11/05)

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4. FEI Number
 65-0343492 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

POPESCU, ENRICO
 913 DIPLOMAT PARKWAY
 HALLANDALE, FL 33009

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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 Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D
 NAME POPESCU, ENRICO
 STREET ADDRESS 913 DIPLOMAT PARKWAY
 CITY-ST-ZIP HALLANDALE, FL

TITLE D
 NAME POPESCU, ILEANA
 STREET ADDRESS 913 DIPLOMAT PARKWAY
 CITY-ST-ZIP HALLANDALE, FL

TITLE
 NAME
 STREET ADDRESS
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TITLE
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 STREET ADDRESS
 CITY-ST-ZIP

U00000953253
 06/19/08-80001-018 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: **06/16/08** 954 5523024
 _____ DATE _____ DAYTIME PHONE # _____