## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS.

SIGNATURE:

City-St-ZP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V68386

(4)

EUROCAN CONTRACTING INC.

FILED
Apr 23 1997 8:00am
Secretary of State

B COMPLETENCE MICHEL COMME COMPLETE COM

Principal Prace of Business Mailing Address P.O. BOX 420032 NAPLES FL 33942  NAPLES FL 34110-0001				<del></del>				
					3. Date Incorporated or Qualified 09/30/1992	3a. Date of Last 04/23/1996		
<del>}</del>	lace of Business	2a. Mailing Address			4. FEI Number	<del>  -</del> -	Applied For	
21 Suite Ant.	# etc	Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	65-0365710	- ¢9.76	Not Applicable Additional	
22		27			5. Certificate of Status Desired	1 1 7 7	Required	
City & Stat	te	City & State			Election Campaign Financing     Trust Fund Contribution		O May Be d to Fees	
Zip 34	710 Country	Zip	Country		8. This corporation has liability for		s. 199.032.	
24 27	9. Name and Address of Curr		30		Florida Statutes  10. Name and Address of New Re		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
ROC	GERS, GARY A		81	Name	1			
275	2 FOUNTAINVIEW CIR.		82	Street Add	KOGEKS GARY A - dress (P.O. Box Number is Not Acceptal	ole)		
UNI	I 108				062 BELAIR LAN.			
NAP	PLES FL 33942		83		1			
			84	City	/= 4. = 6	FL 85 Z	P Code 3.	
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1508, Florida Statute	s, the above	e-named co	rporation submits this statement for the	nurrysee of changing	its renistered	
office or agent. La	registered agent, or both, in the Steam familiar with, and accept the	to of Forida. Such change was au loations of, Section 607.0505, Flor	ithorized by ida Statutes	the corpore .	ation's board of directors. I hereby acce	pt the appointment a	as registered	
SIGNATURE						4/17/97.	,	
12.		agent and tale if applicable (NOTE: NDD DIRECTORS	Registered Age	nt signature requ	olred when reinstating)  ADDITIONS/CHANGES TO OFFI	OFFE /	ORS IN 12	
Tille		DELETE	1.1 TITLE		ADDITIONAÇOI INTOCO TO OTT	Change		
NAME	ROGERS, GARY A.		1 <i>2</i> NAME	1				
STREET ACCORESS			13 STREET	ADDRESS				
CHY-ST-Z-P	NAPLES FL		1.4 CITY-S	IT-ZIP				
THILE		DELETE	2.1 TITLE	}	•	Change	e 🔲 Addition	
NAME ONLINE ADDRESS			2.2 NAME	Abborca	7. ×			
STREET ADORESS CITY-ST ZIP			2.3 STREET 2. 4 CITY -					
TITLE		DELETE	3.1 TITLE	01 411		Change	e Addition	
NAME			3.2 NAME					
STHEE! ACCORESS			3.3 STREET	ADDRESS				
CITY+5*+7IP	ļ	I I Secret	3.4. CITY-	ST-ZIP			_   2100	
1171.6		L DELETE	41 TITLE			L_I Change	e L Addition	
NAME CIDITE ADDRESS			4. 2 NAME					
STREET ADDRESS  CITY-ST-ZIP			4.4 CITY-5	į.				
TILLE		DELETE	5.1 TITLE	71 41		Changi	e Addition	
NAMi			5.2 NAME			_		
SPREET ADDRESS			5.3 STREET	ADDRESS				
CHTY - ST - ZIP			5.4 CITY - S	ST-ZIP				
THILE		☐ DELETE	6.1 TITLE			Change	e Addition	
NAME			6.2 NAME					

63 STREET ADDRESS 64 CITY-ST-ZIP

14. I do 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 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 Justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.