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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20, 1999 8:00am

Secretary of State

01-20-1999 90019 020 ***150.00

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **F96000004890**

Principal Place of Business

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

EAGLE ENTERPRISES INC.

9261 SAN BERNADINO AVE. ENGLEWOOD FL 34224		9261 SAN BERNADINO AVE. ENGLEWOOD FL 34224				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 09/24/1996			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	A	Applied For	
						22-3348517	١	ot Applicable	
Suite, Apt. #	# etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional	
22	11 OCC	27			-	5. Certifcate of Status Desired L	Fee F	Required	
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be	
	•	28				Trust Fund Contribution Added to Fees			
23 Zip	Country	Zip				8. This corporation owes the current year Intangible			
	25 29 30		30	Personal Property Tax. Yes No			□No		
24	9. Name and Address of Current					10. Name and Address of New Registere	d Agent	_	
			1	81	Name				
BINFORD, ROBERT						(D.O. B. Martin Not Appendix No.			
9261 SAN BERNADINO AVE.				82	Street Addr	ress (P.O. Box Number is Not Acceptable)		 	
ENGLEWOOD FL 34224			-	83			14.77.5	is Official light	
2,10									
			Ī	84	City		85 Zir	Code .	
						poration submits this statement for the purpose on's board of directors. I hereby accept the app	L l	to registered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE		\gent	signature require	ed when reinstating) DATE	AND DIRECT	FORS IN 12	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS	Change		
TITLE	P	☐ DELETE	1.1 T/TL	.E		•			
NAME	BINFORD, ROBERT		1.2 NAM	ИE					
STREET ADDRESS	9261 SAN BERNADINO AVE.		1.3 STF	REET.	ADDRESS				
CITY-ST-ZIP	ENGLEWOOD FL 34224		1.4 CIT	Y-ST	- ZIP		[] Chang	e Addition	
TITLE	DELETE 21T		2.1 TYTE	E			Clarig	e D'Addition	
NAME	ZAMMIT, ROSE MARIE		2.2 NA	ΜE					
STREET ADDRESS	9261 SAN BERNADINO AVE.		2.3 STF	REET	ADDRESS				
CITY-ST-ZIP	ENGLEWOOD FL 34224	·	2.4 CIT	Y-S1	T-ZIP			FT Addition	
TITLE	DELETE 3.1		3.1 T∤T	3.1 TITLE			☐ Chang	e Addition	
NAME	The second of th		3.2 NA	ME					
STREET ADDRESS			3.3 STF	REET	ADDRESS			1. 17. 17. 19.	
CITY-ST-ZIP	PATE OF ALL		3.4. CIT	ry-\$1	T-ZIP				
TITLE		☐ DELETE	4.1 TIT	LE		• •	Chang	e Addition	
NAME			4, 2 NA	ME					
STREET ADDRESS	• •		4.3 STI	REET	ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-ST	r-ziP				
TITLE		☐ DELETE	5.1 TIT	LE			Chang	e Addition	
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET	ADDRESS				
CITY-ST-ZIP	3		5.4 CIT	Y-ST	T-ZIP			- 	
TITLE	\$64 € 1 × 7 × 1	☐ DELETE	6.1 TIT	LE			Chang	e Addition	

14. 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 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 of the receiver of pustee 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 an attachment with an address, with all other like empowered. **SIGNATURE**

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP