

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90223 050 ***150.00

DOCUMENT # J02097

1. Corporation Name
EIP HOLDING CORP.

Principal Place of Business
419 KEY EXECUTIVE BLVD
104 CRANDON BLVD
KEY BISCAIYNE FL 33149

Mailing Address
419 KEY EXECUTIVE BLVD
104 CRANDON BLVD
KEY BISCAIYNE FL 33149



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/04/1986

4. FEI Number

13-3335623

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

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

SPENCER, S.A.
251 CRANDON BLVD TH164
KEY BISCAIYNE FL 33149

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SPENCER, S.A.
STREET ADDRESS 251 CRANDON BLVD #164
CITY-ST-ZIP KEY BISCAIYNE FL ☐ DELETE

TITLE VD
NAME DONAGHY, JAMES W.
STREET ADDRESS 7 RIDGEWOOD DR
CITY-ST-ZIP BRIDGEWATER CT ☐ DELETE

TITLE S
NAME LEISCHNER, STEVEN
STREET ADDRESS 1979 DOGWOOD DR
CITY-ST-ZIP WESTFIELD NJ ☐ DELETE

TITLE VD
NAME SPENCER, MARY M
STREET ADDRESS 251 CRANDON BLVD, #164
CITY-ST-ZIP KEY BISCAIYNE FL ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Key Biscayne, FL 33149

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

Bridgewater, CT 06752

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

Scotch Plains, NJ 07076

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Key Biscayne, FL 33149

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

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 or the receiver or trustee 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 for on an attachment with an address with all other like empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director

4/16/99

Date

(305) 361-8864

Daytime Phone #

CR2E034 (1/98)