

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 494435

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: EAGLE OVER HAULING INC.

## Current Principal Place of Business:

2300 CORAL WAY  
SUITE 200  
MIAMI, FL 33145 US

## New Principal Place of Business:

## Current Mailing Address:

2300 CORAL WAY  
SUITE 200  
MIAMI, FL 33145 US

## New Mailing Address:

FEI Number: 59-1650117      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FLORIDA ANNUAL REPORT SERVICES, INC.  
2300 CORAL WAY  
SUITE 200  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ACOSTA, PEDRO JR.  
Address: 1425 WEST 4 LANE  
City-St-Zip: HIALEAH, FL

Title: SAD ( ) Delete  
Name: ACOSTA, CARLOS A  
Address: 1265 WEST 5TH COURT  
City-St-Zip: HIALEAH, FL

Title: ATD ( ) Delete  
Name: ACOSTA, JORGE LUIS  
Address: 1445 WEST 5TH COURT  
City-St-Zip: HIALEAH, FL

Title: D ( ) Delete  
Name: ACOSTA, AIDA  
Address: 1365 WEST 5 COURT  
City-St-Zip: HIALEAH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ACOSTA, PEDRO JR.  
Address: 1425 WEST 4 LANE  
City-St-Zip: HIALEAH, FL 33010 US

Title: SAD (X) Change ( ) Addition  
Name: ACOSTA, CARLOS A  
Address: 1265 WEST 5TH COURT  
City-St-Zip: HIALEAH, FL 33010 US

Title: ATD (X) Change ( ) Addition  
Name: ACOSTA, JORGE LUIS  
Address: 1445 WEST 5TH COURT  
City-St-Zip: HIALEAH, FL 33010 US

Title: D (X) Change ( ) Addition  
Name: ACOSTA, AIDA  
Address: 1365 WEST 5 COURT  
City-St-Zip: HIALEAH, FL 33010 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PEDRO ACOSTA JR

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date