

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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FILED

03 OCT -3 AM 11:20

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **G16235**

1. Entity Name

THE EAGLE SECURITY AND PATROL AGENCY INC.



Principal Place of Business

% ANTONIO FIGUEROA
1850 SW 8 ST SUITE 412
MIAMI FL 33135

Mailing Address

% ANTONIO FIGUEROA
1850 SW 8 ST SUITE 412
MIAMI FL 33135



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2282827 **APPLIED FOR**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FIGUEROA, ANTONIO
2795 S.W. 6TH STREET
MIAMI FL 33135

Name

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

900023522449
10/02/03--01084--023 **550.00

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

PD
FIGUEROA, ANTONIO
2795 SW 6TH ST
MIAMI FL

TITLE
NAME
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☐ Change ☐ Addition

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☐ Change ☐ Addition

12. 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 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: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/14/03 **305-649-2011**

CR2E034 (4/03)

9/14/03

Please Note -

the FBI Number IS
the same as before
59-2282881

Mistake when Mark
APPLIED for.

This is the 3
letter we send
explaining.

Thank for your
Attention.

Eagle Security