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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J38978

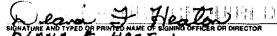
(9)

FILED May 15 1997 8:00am Secretary of State

EAGLE I	PROMOTIONS, INC.								
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Principal Prace	of Business	Mailing Address				T THE PROPERTY OF THE PROPERTY	DEMEN HINTE DI	indi dindi bil	Est Billit i de t
4131 QUAIL BRIAR DR. 4131 QUAIL BRIAR DR.									
VALRICO FL 33594-6371 US US									
US		Ud	1			3. Date Incorporated or Qualified	3a. Dai	te of Last	Report
			•			10/22/1986	08/2	22/1996	;
2. Principal Pl	ace of Business	2a. Mailing Address		:		4. FEI Number			Applied For
21		26				59-2725258			Not Applicable
Suite, Apt.	#, €tc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State	0	Crtv & State	Crty & State			6. Election Campaign Financing	····		May Be
23	-	28				Trust Fund Contribution			d to Fees
Zφ	Country	Zip	Cou	ntry	***	8. This corporation has liability for i		tax under	s. 199.032,
24	25		30			4] No	
	9. Name and Address of Curren	t Registered Agent		81 1		10. Name and Address of New Re	glatered A	gent	
	G, D. MITCHELL			ין יפ	Name				
607 WEST HORATIO STREET				82 5	Street Addre	ss (P.O. Box Number is Not Acceptat	le)	-	
IAN	IPA FL 33606		-	83	·····				
			1		····		····		
				84 (City		FL	85 Zij	p Code
11. Pursuant i	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	s, the at	ove-n	amed corpo	oration submits this statement for the p	urpose of	changing	its registered
office or re agent. La	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was a stions of, Section 607.0505, Flo	uthorized rida Stat	d by th utes.	ne corporatio	on's board of directors. I hereby accep	ot the appo	intment a	is registered
SIGNATURE									
	Signature, typed or printed name of registered ager			Agent s	ilgnature required	d when reinstaling)	DATE		
12.	OFFICERS AND	DELETE	13. 1.1 (1)			ADDITIONS/CHANGES TO OFFIC		Change	
TITLE NAME	HEATON, DIANA F.		1.2 NA				1	T cum de	, D Addition
STREET ADDRESS	4131 QUAIL BRIAR DR			reet ad	OBESS				}
CITY - ST - ZIP	VALRICO FL			ry-ST-2	1				ļ
TILE		☐ DELETE	2.1 TIT					☐ Change	e 🔲 Addition
NAME			2.2 NA	ME					1
STREET ADDRESS			2.3 \$1	REET AD	ORESS				
CITY - S1 - ZIP	, , , , , , , , , , , , , , , , , , , ,			TY-ST-	ZIP				- 13 64 65
TITLE		☐ DELETE	3.1 717					∐ Change	e 🔲 Addition
NAME			32 NA						
STREET ADDRESS				REET AD					ļ
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TII	TY-ST- TLE	LIF.			☐ Change	e Addition
NAME			4. 2 N					•	
STREET ADDRESS	1		4.3 ST	REET AD	ORESS				1
CITY-ST-ZIP			4.4 CI	TY-\$T-2	ZIP				
11ºLE		☐ DELETE	5.1 111	TLE				☐ Change	e Addition
NAME			5.2 NA	ME					Ì
STREEL ADDRESS			5.3 ST	REET AD	DRESS				
CITY-ST-ZIP		I Drugge		TY-\$1-2	ZIP .	·		T Chart	a
TITLE		DELETE	6.1 Til					Change	e 🔲 Addition
NAMÉ OTOTOT A SOURCES			6.2 NA		NDBECC				
STREET ADDRESS			8	REET AD					
CHTY - ST - ZIP			0.4 CI	TY-ST-	LIF				

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 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, or on an attachment with an address.

SIGNATURE:



4-29-97 813-689-9234