

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

98-99AR
Pamela B. Noe
Secretary of State
DIVISION OF CORPORATIONS

FILED

90 JUN 11 PM 3:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K49490**

1. Corporation Name

EAGLE INTERNATIONAL SUPPLY CO.

Principal Place of Business

8306 MILLS DRIVE
SUITE 211
MIAMI FL 33183

Mailing Address

8306 MILLS DRIVE
SUITE 211
MIAMI FL 33183

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/13/1988

5. FEI Number

65-0138183

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Title(s) 1 | Name of Officers and/or Directors 2 | Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3 | City / State / Zip 4 |
|---------------|---|--|---|
| P | PIGOTT, MIKE A. | 8306 MILLS DRIVE | MIAMI FL |
| DP | PIGOTT, YORIE O. | 8306 MILLS DRIVE | MIAMI FL |
| | | | 200002905292--3 -06/15/99--01070--025 *****8.75 *****8.75 |
| | | | 200002905292--3 -06/15/99--01070--026 ****150.00 ****150.00 |
| | | | 200002905292--3 -06/15/99--01070--027 ****750.00 ****750.00 |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PIGOTT, MIKE
8306 MILLS DRIVE
MIAMI FL 33183

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT SIGNATURE

Date: April 19th 99.

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MIKE PIGOTT PRES.

Date

Day and Month

April 19th 1999 305-85-9045

CR2E040 (9/98)