

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 17, 2002 8:00 am
Secretary of State

07-17-2002 90131 001 ***558.75

DOCUMENT # K58294

1. Entity Name

EAGLE MECHANICAL CONTRACTORS, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7539 NW 70th St.

3. Mailing Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami, FL

City & State

4. FEI Number

65-0092633

Applied For

Not Applicable

Zip
33166

Country
Miami-Dade

Zip

Country

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Francisco J. Estrada

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

7539 NW 70th St.

City Miami

FL

Zip Code
33166

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/T/S Francisco J Estrada 7539 NW 70th St. Miami, FL 33166
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IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other duly empowered.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/9/02 (305)885-9911

CR2E034B (12/01)