PROFIT CORPORATION ANNUAL REPORT 1998	Sandra B Secretar	RTMENT OF STATE <b>. Mortham</b> ry of State CORPORATIONS	Sep 23 1998 8:00an Secretary of State
Corporation Name # M43 EAGLE CONSOLIDATED, INC.	454 (1)		
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incipal Place of Business I AIRPORT ROAD PLES FL 33942	Mailing Address P.O. BOX 1257 NAPLES FL 33942-3518		
			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 40/47/4000
Principal Place of Business	2a. Mailing Address		12/17/1986           4. FEI Number         Applied For           59-2797288         Not Applicable
Suite, Apt #, etc.	Suite, Apt. #, etc.	·····	5. Certificate of Status Desired Status Desired Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution
Zip Country	Zip 29 Current Registered Agent	Country 30	<ol> <li>8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.</li> <li>10. Name and Address of New Registered Agent</li> </ol>
4099 TAMIAMI TRAIL NORTH		82 Street	Address (P.O. Box Number is Not Acceptable)
NAPLES FL 34103	507 0502 and 507 1508. Florida Statuta	83 84 City	FL 85 Zip Code
NAPLES FL 34103  Pursuant to the provisions of sections 6 office or registered agent, or both, in th agent. I am familiar with, and accept th	re State of Florida. Such change was a	83 84 City s, the above-named ci uthorized by the corpo	IB5 Zin Code
NAPLES FL 34103  Pursuant to the provisions of sections 6 office or registered agent, or both, in th agent. I am familiar with, and accept th GNATURE Signalure, typed or printed name of regis	the State of Florida. Such change was a to obligations of, section 607.0505, Flo	83 84 City s, the above-named ci uthorized by the corpo	FL 85 Zip Code propration submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered
NAPLES FL 34103         • Pursuant to the provisions of sections 6 office or registered agent, or both, in th agent. I am familiar with, and accept the Standard or printed name of registered agent.         GNATURE         • Standard or printed name of registered agent.         • OFFICE         • Standard or printed name of registered agent.         • OFFICE         • Standard or printed name of registered agent.         • OFFICE         • Standard or printed name of registered agent.         • OFFICE         • BasenkEvich, William J.	tered agent and title if applicable (NO	83 84 City s, the above-named ci uthorized by the corpor rida Statutes. 14. Registered Agent signatur	FL       85       Zip Code         proporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered         a required when reinstating)       DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         P       Change         Queent       Lypida
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