


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2004 08:00 AM
Secretary of State

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| DOCUMENT # P00000054438 1. Entity Name EAGLE INTERIOR DESIGNERS, INC. |  |
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|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| Principal Place of Business 8370 W FLAGLER STREET 234 MIAMI, FL 33144 | Mailing Address 8370 W FLAGLER STREET 234 MIAMI, FL 33144 |
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04072004 No Chg-P CR2E034 (10/03)

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|------------------------------------|--------------------------------------|
| 4. FEI Number 65-1016155 | Applied For Not Applicable |
|------------------------------------|--------------------------------------|

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NUNEZ, RAFAEL J
8370 W FLAGLER STREET
234
MIAMI, FL 33144**

**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. 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 \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

| | |
|------------------------------------------------|-------------------------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSD NUNEZ, RAFAEL J 3840 SW 48TH COURT FORT LAUDERDALE, FL 33312 |
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04/12/04-80057-023 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 another like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAFAEL J. NUNEZ

Date

Daytime Phone #

4/7/04 (305) 487-3377