

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2003 8:00 am
Secretary of State

08-15-2003 90080 024 ***150.00

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DOCUMENT # P01000113150

1. Entity Name

EAGLE POSTAL CENTER, INC.



Principal Place of Business

**1140 NE 163 ST. SUITE #20
NORTH MIAMI BEACH FL 33162**

Mailing Address

**1140 NE 163 ST. SUITE #20
NORTH MIAMI BEACH FL 33162**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1155735

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VANEGAS, LUCIO A

1140 NE 163 ST. SUITE #20

NORTH MIAMI BEACH FL 33162

Name

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

City

FL

Zip Code

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 \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
VANEGAS, LUCIO A
1140 NE 163 ST. SUITE #20
NORTH MIAMI BEACH FL 33162** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LUCIO VANEGAS

(305) 944 8081

Date **Aug 12 2003** Phone #

CP2E034 (4/03)

Attachment

90150577
#PD1000113150

Eagle Postal Center Inc.
1140 NE 163 Street Suite #20
North Miami Beach, FL 33162
Document # P01000113150

Eagle Postal Center Inc.

August 12, 2003

Division of Corporations
Uniform Business Report Office
P.O. Box 1500

Dear Sir or Madam:

Please note that this is the first notice we have received to renew our Uniform Business Report, we did not receive the prior notice.

Thanks for your immediate attention to this matter.

Sincerely,



Lucio A. Vanegas
President

