2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000028655

Entity Name: EAGLE MIAMI BEACH SERVICE INC

FILED Apr 11, 2006 Secretary of State

Current Principal Place of Business:			New Princ	ipal Place of Business:	
13937 SW 4 B	44 LN.CR.				
MIAMI, FL	33175				
Current Mailing Address:			New Mailing Address:		
13937 SW 4	44 LN.CR				
MIAMI, FL 33175					
FEI Number:	71-0941820	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
PALACIOS, 13937 SW 4 B MIAMI, FL 3					
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 of Registered Agent	i	Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () PALACIOS, VICT 13937 SW 44 LN MIAMI, FL 3317	I.CR. B	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	T () RAFAEL, BERNA 9720 HAMMCKT MIAMI, FL 3319	S BLV	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	WALTER, RIVAS	Γ SHERIDAN AVE	Title: Name: Address: City-St-Zip:	S (X) Change () Addition JOSE, AQUINO 405 WEST 28 ST SHERIDAN AVE MIAMI BEACH, FL 33140	
Title: Name: Address: City-St-Zip:	T () MAR, HELADIO 405 WEST 28 S MIAMI BEACH, I	Γ SHERIDAN AVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	T () I RENTERIA, PED 1780 MARSELLE MIAMI BEACH, F	ES DR. # 4	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	PALACIOS, MAR	SHERIDAN AVE	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition PALACIOS, MARTHA G 405 WEST 28 ST SHERIDAN AVE MIAMI BEACH, FL 33140	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTHA G PALACIOS VP 04/11/2006