2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2007 8:00 am
Secretary of State
02-14-2007 90059 046 ***150.00

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1. Entity Name
E.G. INTERNATIONAL, CORP.

40017179

Principal Place of Business	Mailing Address
2520 CENTER GATE DRIVE #105 MIRAMAR, FL 33025	2520 CENTER GATE DRIVE #105 MIRAMAR, FL 33025

01262007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
8280 NW 27th Street	8280 NW 27th Street
Suite Apt # etc: Suite 505	Suite Apt # etc: Suite 505
City & State: Miami, FL 33122	City & State: Miami, FL 33122
Zip / Country	Zip / Country

4. FEI Number: 65-1180404 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

ESTRADA, JUAN J
2520 CENTER GATE DRIVE #105
MIRAMAR, FL 33025

7. Name and Address of New Registered Agent

Name: Estrada, Juan J
Street Address (P.O. Box Number is Not Acceptable): 8280 NW 27th Street
Suite 505
City: Miami FL Zip Code: 33122

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, 2007 Fee will be $550.00

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	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD ESTRADA, JUAN J 2520 CENTER GATE DRIVE #105 MIRAMAR, FL 33025 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD Estrada, Juan J 8280 NW 27th Street Suite 505 Miami FL 33122 ☒ Change ☐ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GAITAN, MARIA C 2520 CENTER GATE DRIVE #105 MIRAMAR, FL 33025 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Gaitan, Maria C 8280 NW 27th Street Suite 505 Miami FL 33122 X Change ☐ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Add
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Add

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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