2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000117759

WICHTENDHAL, ALLEN

PENSACOLA, FL 32514

502 IVES PLACE

Name:

Address:

City-St-Zip:

FILED Sep 25, 2007 Secretary of State

Entity Name: EAGLE SOLAR PRODUCTS, INC. **Current Principal Place of Business: New Principal Place of Business:** 502 IVES PLACE PENSACOLA, FL 32514 **Current Mailing Address: New Mailing Address: 502 IVES PLACE** PENSACOLA, FL 32514 FEI Number: 43-2058747 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WICHTENDHAL, ALLEN MCKINNEY, ARNOLD E D 502 IVES PLACE 502 IVES PLACE PENSACOLA, FL 32514 US PENSACOLA, FL 32514 US 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: ARNOLD E. MCKINNEY 09/25/2007 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MCKINNEY, MIRNA Q Name: Name: **502 IVES PLACE** Address: Address: City-St-Zip: PENSACOLA, FL 32514 City-St-Zip: Title: Title: () Change () Addition () Delete Name: MCKINNEY, ARNOLD Name: **502 IVES PLACE** Address: Address: PENSACOLA, FL 32514 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SOTO, JOSE

502 IVES PLACE

PENSACOLA, FL 32514

SIGNATURE: ARNOLD E. MCKINNEY D 09/25/2007