

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000134377

FILED
Aug 01, 2006
Secretary of State

Entity Name: EAGLE RESOLUTIONS & RESOURCES INTERNATIONAL, INC.

Current Principal Place of Business:

3681 SW 161 TERRACE
MIRAMAR, FL 33027 US

New Principal Place of Business:

10281 SW 15 ST
PEMBROKE PINES, FL 33025 US

Current Mailing Address:

15841 PINES BLVD
171
PEMBROKE PINES, FL 33027 US

New Mailing Address:

FEI Number: 76-0682555 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ACOSTA, ELVIS
3681 SW 161 TERRACE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

ACOSTA, ELVIS
10281 SW 15 ST
PEMBROKE PINES, FL 33025 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: _____

08/01/2006

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:

Title: P () Delete
Name: ACOSTA, ELVIS
Address: 3681 SW 161 TERRACE
City-St-Zip: MIRAMAR, FL 33027 US

Title: VP () Delete
Name: ACOSTA, FATIMA R
Address: 3681 SW 161 TERRACE
City-St-Zip: MIRAMAR, FL 33027 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ACOSTA, ELVIS
Address: 10281 SW 15 ST
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: VP (X) Change () Addition
Name: ACOSTA, FATIMA R
Address: 10281 SW 15 ST
City-St-Zip: PEMBROKE PINES, FL 33025 US

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: FATIMA R ACOSTA

VP

08/01/2006

Electronic Signature of Signing Officer or Director

Date