

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000045071

Entity Name: EAGLES MASONRY, INC.

FILED
Sep 04, 2007
Secretary of State

Current Principal Place of Business:

4594 YORKSHIRE LN.
KISSIMMEE, FL 34758 US

New Principal Place of Business:

425 DIAMOND ACRES RD
DAVENPORT, FL 33837 US

Current Mailing Address:

4594 YORKSHIRE LN.
KISSIMMEE, FL 34758 US

New Mailing Address:

425 DIAMOND ACRES RD
DAVENPORT, FL 33837 US

FEI Number: 52-2455894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

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: D () Delete
Name: MIRANDA, EDUARDO
Address: 4594 YORKSHIRE LN.
City-St-Zip: KISSIMMEE, FL 34758 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MIRANDA, EDUARDO
Address: 425 DIAMOND ACRES RD
City-St-Zip: DAVENPORT, FL 33837 US

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.

SIGNATURE: EDUARDO MIRANDA

D

09/04/2007

Electronic Signature of Signing Officer or Director

_____ Date