

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000150792

Entity Name
EAGLE & SON, INC



Principal Place of Business
2700 WEST ATLANTIC BLVD,
SUITE # 200-26
POMPANO BEACH, FL 33069

Mailing Address
2700 WEST ATLANTIC BLVD,
SUITE # 200-26
POMPANO BEACH, FL 33069



05312007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3833091

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SUTHERLAND, WISBOURNE A
2700 WEST ATLANTIC BLVD
200-26
POMPANO BEACH, FL 33069

**DO NOT WRITE
IN THIS SPACE**

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 principal applicant (NOTE: Registered Agent signature required when resigning) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SUTHERLAND, WISBOURNE
STREET ADDRESS	2700 WEST ATLANTIC BLVD, SUITE # 200-26
CITY ST ZIP	POMPANO BEACH, FL 33069
TITLE	VP
NAME	PAUL, FRANCOIS
STREET ADDRESS	2700 WEST ATLANTIC BLVD, SUITE # 200-26
CITY ST ZIP	POMPANO BEACH, FL 33069
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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06/05/07-80002-019 150.00

**DO NOT WRITE
IN THIS SPACE**

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

05/31/07. 954-3697147
Date
Dyingne Print #