## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000012193

Entity Name: EAGLE TEAM SERVICES, INC.

FILED Feb 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1790 NW 127 WAY

POMPANO BEACH, FL 33071

Current Mailing Address: New Mailing Address:

PO BOX 759566

CORAL SPRINGS, FL 33075

FEI Number: 20-4206501 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAVILA, HARRY GONZALEZ, MARIA 1790 NW 127TH WAY 1790 NW 127TH WAY

CORAL SPRINGS, FL 33071 US CORAL SPRINGS, FL 33071 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: MARIA GONZALEZ 02/04/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 DAVILA, HARRY
 Name:
 GONZALEZ, MARIA G

 Address:
 1790 NW 127TH WAY
 Address:
 1790 NW 127TH WAY

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:
 CORAL SPRINGS, FL 33071

Title: D () Delete Title: VP (X) Change () Addition

Name: GONZALEZ, MARIA G Name: GARCIA, LORNA M

 Address:
 1790 NW 127TH WAY
 Address:
 9044 W ATLANTIC BLVD #327

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:
 CORAL SPRINGS, FL 33071

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 GARCIA, LORNA M
 Name:

 Address:
 9044 W ATLANTIC BLVD APT 327
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 DAVILA, HARRY JR
 Name:

 Address:
 12635 NW 14TH ST
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:

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: MARIA GONZALEZ P 02/04/2009