

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000079057

FILED
Apr 12, 2009
Secretary of State

Entity Name: EAGLE EYES CONSULTING CORPORATION

Current Principal Place of Business:

17807 S. W. 36TH ST.
MIRAMAR, FL 33029

New Principal Place of Business:

15622 S. W. 53RD ST.
MIRAMAR, FL 33027

Current Mailing Address:

17807 S. W. 36TH ST.
MIRAMAR, FL 33029

New Mailing Address:

15622 S. W. 53RD ST.
MIRAMAR, FL 33027

FEI Number: 20-5020011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAUD, REYNALDO
17807 S. W. 36TH ST.
MIRAMAR, FL 33029 US

Name and Address of New Registered Agent:

GAUD, REYNALDO
15622 S. W. 53RD ST.
MIRAMAR, FL 33027 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:

04/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GAUD, REYNALDO
Address: 17807 S. W. 36TH ST.
City-St-Zip: MIRAMAR, FL 33029

Title: VP (X) Delete
Name: GAUD, IVELISSE
Address: 17807 S. W. 36TH ST.
City-St-Zip: MIRAMAR, FL 33029

Title: VP () Delete
Name: GAUD, MICHAEL A
Address: 17807 S. W. 36TH ST.
City-St-Zip: MIRAMAR, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GAUD, REYNALDO
Address: 15622 S. W. 53RD ST.
City-St-Zip: MIRAMAR, FL 33027

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: REYNALDO GAUD

P

04/12/2009

Electronic Signature of Signing Officer or Director

Date