

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000004911

FILED
Sep 12, 2009
Secretary of State

Entity Name: EAGLE'S NEST SUPPLY INC

Current Principal Place of Business:

14626 NW 27 AVE
OPA-LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 541126
OPA LOCKA, FL 33054

New Mailing Address:

FEI Number: 20-8181863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, CAMILLA M
3425 FOXCROFT RD
MIRAMAR, FL 33025 US

Name and Address of New Registered Agent:

JOSEPH, CAMILLA M
3425 FOXCROFT RD
MIRAMAR, 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: CJOSEPH

09/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOHNSON, CAMILLA M
Address: 3425 FOXCROFT RD
City-St-Zip: MIRAMAR, FL 33025 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOSEPH, CAMILLA M
Address: 3425 FOXCROFT RD
City-St-Zip: MIRAMAR, FL 33025 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: CJOSEPH

P

09/12/2009

Electronic Signature of Signing Officer or Director

Date