

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000086721

FILED  
Oct 03, 2008  
Secretary of State

Entity Name: EAGLE ACA SERVICE REPAIR INC

## Current Principal Place of Business:

1445 WEST 39TH PLACE  
HIALEAH, FL 33012

## New Principal Place of Business:

1445 WEST 39TH PLACE  
HIALEAH, FL 33012 US

## Current Mailing Address:

1445 WEST 39TH PLACE  
HIALEAH, FL 33012

## New Mailing Address:

1445 WEST 39TH PLACE  
HIALEAH, FL 33012 US

FEI Number: 26-0627990

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CABALLERO, ABILIO  
1445 WEST 39TH PLACE  
HIALEAH, FL 33012 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: ABILIO CABALLERO

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: PRES ( ) Delete  
Name: CABALLERO, ABILIO  
Address: 1445 WEST 39TH PLACE  
City-St-Zip: HIALEAH, FL 33012

Title: VP ( ) Delete  
Name: CABALLERO, YOLEIDY  
Address: 1445 WEST 39TH PLACE  
City-St-Zip: HIALEAH, FL 33012

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CABALLERO, ABILIO  
Address: 1445 WEST 39TH PLACE  
City-St-Zip: HIALEAH, FL 33012

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: ABILIO CABALLERO

P

10/03/2008

Electronic Signature of Signing Officer or Director

Date