

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000061875

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** AMERICAN EAGLE LOAN RESTRUCTURING INC

**Current Principal Place of Business:**

8983 OKEECHOBEE BLVD.  
202-# 168  
WEST PALM BEACH, FL 33411 US

**New Principal Place of Business:**

**Current Mailing Address:**

8983 OKEECHOBEE BLVD., WEST PALM BEACH FL  
202-# 168  
WEST PALM BEACH, FL 33411 US

**New Mailing Address:**

8983 OKEECHOBEE BLVD.  
202-# 168  
WEST PALM BEACH, FL 33411 US

**FEI Number:** 45-2738800

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FIGUEROA, CARLOS F  
AMERICAN EAGLE LOAN RESTRUCTURING INC.  
202- # 168  
WEST PALM BEACH, FL 33411 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FIGUEROA, CARLOS F  
Address: 8983 OKEECHOBEE BLVD.  
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: P  
Name: FIGUEROA, CARLOS F  
Address: 2375 SAILFISH COVE DR.  
City-St-Zip: WEST PALM BEACH, FL 33411 US

I hereby 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 all other like empowered.

SIGNATURE: CARLOS F FIGUEROA

P

03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date