

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P93000013309 (8)**

1. Corporation Name
EAGLE EXPORTS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 2701 W BUSCH BLVD SUITE 107 TAMPA FL 33618 US	Mailing Address 901 NO FRANKLIN ST SUITE 107 TAMPA FL 33602 US
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3. Date Incorporated or Qualified
02/11/1993

2. Principal Place of Business 21 801 BROOKER Village Cir Suite, Apt. #, etc.	2a. Mailing Address 26 801 BROOKER Village Cir Suite, Apt. #, etc.
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4. FEI Number
59-3170702

22	City & State Lutz, Florida
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

23	City & State Lutz, Florida
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6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

24	Zip 33549	25	Country US	27	City & State Lutz, Florida	28	City & State Lutz, Florida	29	Zip 33549	30	Country US
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8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent KUZNETSOV, VLADISLAV 901 NO FRANKLIN ST SUITE 107 TAMPA FL 33602	
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10. Name and Address of New Registered Agent	
81	Name Kuznetsov Vladislav
82	Street Address (P.O. Box Number is Not Acceptable) 19006 St. LAURENT DR.
83	
84	City Lutz
85	Zip Code FL 33549

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **VIAD Kuznetsov president 04.14.98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	KUZNETSOV, VLADISLAV	1.2 NAME	Kuznetsov Vladislav
STREET ADDRESS	801 BROOKER VILLAGE CIRCLE	1.3 STREET ADDRESS	19006 St. LAURENT DR.
CITY-ST-ZIP	LUTZ FL	1.4 CITY-ST-ZIP	Lutz, FL. 33549
TITLE	D	2.1 TITLE	D
NAME	KUZNETSOV, OLGA	2.2 NAME	Kuznetsov Olga
STREET ADDRESS	801 BROOKER VILLAGE CIR	2.3 STREET ADDRESS	19006 St. LAURENT DR.
CITY-ST-ZIP	LUTZ FL	2.4 CITY-ST-ZIP	Lutz, FL. 33549
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

04.14.98

CR2E034 (10/97)