2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000074467

Address:

City-St-Zip:

14151 SW 24TH ST

FORT LAUDERDALE, FL 33325

Entity Name: CROWN EAGLE FINANCIAL CORP

FILED Apr 11, 2006 Secretary of State

Littly Nai	ile. CROWI	N LAGEL FINANCIAL COI	ΧΓ.				
Current P	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:			
	24 STREET ON CARGILI 33325	-					
Current Mailing Address:			New Maili	New Mailing Address:			
	24 STREET ON CARGILI 33325	-					
FEI Number:	65-0445604	FEI Number Applied For) FEI Number Not Appl	icable ()	Certificate of Status De	sired ()	
Name and	Address of	Current Registered Age	nt: Name and	Name and Address of New Registered Agent:			
CARGILL, 14151 SW FORT LAL		FL 33325 US					
	named entity of Florida.	submits this statement fo	r the purpose of changing i	ts registered off	ice or registered age	ent, or both,	
SIGNATUR	RE:						
	Electro	onic Signature of Register	ed Agent		Date		
Election Car	npaign Financi	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D (SAENZ, RAUI 8180 N.W. 36 MIAMI, FL 33	STREET	Title: Name: Address: City-St-Zip:	()(Change () Addition		
Title: Name: Address: City-St-Zip:	DP (CARGILL, AL 14151 SW 24 DAVIE, FL 33	STREET	Title: Name: Address: City-St-Zip:	()(Change () Addition		
Title: Name: Address: City-St-Zip:	CARGILL, WA 14151 SW 24		Title: Name: Address: City-St-Zip:	TD (X) C CARGILL, WALTI 14151 SW 24TH DAVIE, FL 33325	ST		
Title:	SD () Delete	Title:	SD (X) C	Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

14151 SW 24TH ST

DAVIE, FL 33325

SIGNATURE: ALLISON CARGILL P 04/11/2006