

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 17, 2002 8:00 am
Secretary of State

02-17-2002 90036 003 ***150.00

DOCUMENT # P94000037251

1. Entity Name

EAGLE SET-UP & SERVICES, INC.

DO NOT WRITE IN THIS SPACE

822232

2. Principal Place of Business

16 Alabama Lane

Suite, Apt. #, etc.

3. Mailing Address

16 Alabama Lane

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

AUBURNDALE, FL

City & State

AUBURNDALE, FL

4. FEI Number

59-3255350

Applied For

Not Applicable

Zip

33823

Country

POLK

Zip

33823

Country

POLK

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**DO NOT WRITE
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$81.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D
NAME SPAIN, DAVID
STREET ADDRESS 1611-17TH ST NW
CITY-ST-ZIP WINTER HAVEN FL 33881

TITLE T
NAME BROWN SPAIN, CYNTHIA
STREET ADDRESS 1611-17TH ST NW
CITY-ST-ZIP WINTER HAVEN FL 33881

TITLE S
NAME BROWN SPAIN, CYNTHIA
STREET ADDRESS 1611-17TH ST NW
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

David Spain

Owner

2-1-02

863-965-0804

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)