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

PROFIT CORPORATION ANNUAL REPORT

1998

BIONATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000057290 (6)

EAGLE'S FLIGHT OF AMERICA INC.

Mar 25 1998 8:00am Secretary of State

FILED



12/3/98

(519)767-1247

CR2E034

Principal Place of Business Mailing Address % HODGSON RUSS ANDREWS WOODS & GOODYEAR **% HODGSON RUSS ANDREWS WOODS & GOODYEAR** 2000 GLADES RD SUITE 400 BOCA RATON FL 33431 2000 GLADES RD SUITE 400 DO NOT WRITE IN THIS SPACE BOCA RATON FL 33431 3. Date Incorporated or Qualified 08/03/1994 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 26 65-0545522 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. X Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent A1 Name HRAWG CORP 2000 GLADES RD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 400 63 **BOCA RATON FL 33431** 84 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12, 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 THEF TITLE SOMOS, ALEXANDER R NAME 12 NAME 2000 GLADES RD., STE 400 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE D 2.1 TITLE Change GELDART, D P 2.2 NAME 2000 GLADES RD., STE 400 STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** CITY - ST- 2IP 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE TITLE Change Addition LONEY, DAVID M 3.2 NAME STREET ADDRESS 2000 GLADES RD., STE 400 3.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City - ST- ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST- ZIP CITY-ST-ZIP 14. Thereby 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 supplied ental 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.