SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT #** P95000049016 (5) EAGER CONSTRUCTION, INC. Mailing Address Principal Place of Business 6651 NW 23RD ST 6651 NW 23RD ST MARGATE FL 33063 MARGATE FL 33063 3a. Date of Last Report 3. Date Incorporated or Qualified 06/22/1995 Applied For £EL Number Mailing Address Principal Place of Business 2. Not Applicable 65-0566/19 26 21 \$8.75 Additional Suite Apt #, etc Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199 032 Country Zip Zip Country Florida Statutes Yes No.

Name and Address of New Registered Agent 30 24 25 29 9. Name and Address of Current Registered Agent 81 Name EAGER, TIM A Street Address (P.O. Box Number is Not Acceptable) 82 6651 NW 23RD ST MARGATE FL 33063 в3 Ziu Code 84 City 85 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. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. DAIL SIGNATURE (NA)TE Registered Agent signature required when re-influency) Signature, typed or prieted name of registered agent and title it applicable (36/8)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition DELETE 1.1 TOLE D TITLE CR2E034 12 NAME EAGER, TIM A NAME 6651 NW 23RD ST 13 STREET ADDRESS STREET ADDRESS MARGATE FL 33063 1.4 CITY - \$1 - ZP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2 2 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 City - ST-7-P CITY-ST-ZIP Change Addition DELETE 31 TITLE TITLE 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-7/P Change Addition DELETE 5 1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIP 500001928785<sup>nage | Adaden</sup> -08/21/96--01069--027 DELETE 61 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS \*\*\*383.75 STREET ADDRESS 64 CITY - ST - 7IP defined the properties of the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 in made under oath, that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. CITY-ST-7IP

SIGNATURE:

8-16-96 954972 CC