2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 20, 2001 8:00 am
Secretary of State
09-20-2001 90001 005 ***558.75

DOCUMENT # P95000079906

1. Entity Name
CARIBBEAN EAGLE, INC.

A0086830

Principal Place of Business	Mailing Address
13025 SW 132ND AVE MIAMI, FL 33186	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
13025 SW 132ND AVE	13025 SW 132ND AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI, FL	City & State: MIAMI, FL
Zip: 33186 Country: USA	Zip: 33186 Country: USA

4. FEI Number: 65-0628561 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
	Name: FRANCIS D. STURT Street Address (P.O. Box Number is Not Acceptable): 15830 SW 147TH AVE City: MIAMI FL Zip Code: 33187

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: PATRICE BACKER Patrice Backer 9/10/01
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) ☐

FILE NOW! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PHILIPPE J.M. GORNAIL 7721 SW 173RD ST MIAMI, FL 33187	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V FRANCIS D. STURT 15830 SW 147TH AVE MIAMI, FL 33187	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PATRICE BACKER 4005 TURQUOISE TRAIL WESTON, FL 33331	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (11/00)

13. 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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patrice Backer 9/10/01 786-293-3535
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #