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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000082127 (8)

EAGLE'S BERTH, INC.

FILED May 11 1998 8:00am Secretary of State



Principal Place	of Rusinase	Mailing Address						II FRANTINI	
Principal Place of Business Mailing Address 1783 HEARTH ST 1793 HEARTH ST									
MIDDLEBURG			MIDDLEBURG FL 32068						
						DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifie	d			
					10/23/1995		······································		
	ace of Business	2a. Mailing Address			'		plied For		
21		26					ot Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75			
22		27					Fee Re	•	
City & State		City & State	├ ─┐ '		6, Election Campaign Financing	, -	\$5.00		
Zip				Trust Fund Contribution		Added 1			
<u> </u>	<u></u>	h	<u> </u>	y	This corporation owes or has Personal Property Tax due Ju			langible] No	
24	25 Name and Address of Currer	29 Agent	30		10. Name and Address of New			7 140	
DΩ	TH, CHARLES	The grant of the same	81	Name	10, 714				
	3 HEARTH ST								
	DOLEBURG FL 32068		82	Street Addi	ress (P.O. Box Number is Not Accep	itable)			
MIL	DEBONG I E SEGO		83						
			84	City		FL	85 Zip (Code	
44 Pureuent	to the provisions of Sections 607.050	12 and 607 1508 Florida Statu	tes the abov	a-pamod corr	poration submits this statement for th		L Changing it	s registered	
Office or r	egistered agent, or both, in the State	of Elorida. Such change was	authorized b	v the corporat	tion's board of directors. I hereby ac	cept the app	ointment as	registered	
agent. La	m familiar with, and accept the oblig-	ations of, Section 607.0505, FI	iorida Statute	S.					
SIGNATURE	Signature, typed or printed name of registered age	ent nead title if anythic to do (NO)	IF Booistmed An	ent signature requi	red when reinstalling)	DATE			
12,	OFFICERS AN		13.		ADDITIONS/CHANGES TO OF		DIRECTOR	IS IN 12	
TITLE	D	DELE te	1,1 1ITLE			<u> </u>	Change	Addition	
NAME	ROTH, CHARLES		1.2 NAME						
STREET ADDRESS	1793 HEARTH ST		1.3 STREE	I ADDRESS					
CITY-ST-ZIP	MIDDLEBURG FL 32068		1.4 CITY-	ST-ZIP					
TITLE	DELETE		2.1 TITLE				Change	Addition	
NAME			2.2 NAME						
STREET ADDRESS			2.3 S1REE	I ADDRESS					
CITY-ST-ZIP			2. 4 CITY-						
TITLE		DELETE	31 TITLE				Change	Addition	
NAME			3.2 NAME				-		
STREET ADDRESS	•			T ADDRESS					
CITY-ST-ZIP			3.4. CITY -						
TITLE		DELETE	4.1 TOTLE				Change	Addition	
NAME			4. 2 NAME				-		
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP			4.41 TY-						
TITLE		DELETE	5.1 TLE				Change	Addition	
NAME		_	5.2 AME				•		
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP			5.4 CITY-						
TITLE		☐ DELET E	61 TITLE	V: 4"			Change	Addition	
NAME			6.2 NAME						
STREET ADDRESS				T ADDRESS					
			6.4 CITY -						
CITY-ST-ZIP			0.4 UH Y -	1 - Δ1Γ					

14. 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 annual report or supplemental 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.

ساما بمسابد