

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 JUL 28 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000091254

1. Corporation Name

EAGLE INTERNATIONAL CORP.

Principal Place of Business

Mailing Address

REINSTATEMENT 97-98-

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 6670 Ilex Circle Suite, Apt. #, etc. F City & State NAPLES, FLORIDA Zip 34109 Country usa		3. New Mailing Office Address, If Applicable 6670 Ilex Circle Suite, Apt. #, etc. F City & State NAPLES, FLORIDA Zip 34109 Country USA		4. Date Incorporated or Qualified To Do Business in Florida November 30, 1995	
				5. FEI Number 65-0630063	
				Applied For Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	Raymond W. Baszner	6670 Ilex Circle #F	Naples, Florida 34109
			000002606710--8 -08/04/98--01043--001 *****300.00 *****300.00
			0000026067100028 -08/04/98--01043--0028 *****8.75 *****8.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name
Raymond Baszner
Street Address (P.O. Box Number is Not Acceptable)
6670 Ilex Circle
Suite, Apt. #, Etc.
F
City
Naples
State
FL
Zip Code
34109

I, the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Raymond W Baszner
REGISTERED AGENT MUST SIGN

Date

7-27-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes No

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Raymond W Baszner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-27-98
Date

941-594-0191
Daytime Phone #

CR2E040 (1/98)