

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000062911

FILED  
May 27, 2008  
Secretary of State

Entity Name: EAGLES SCIENTIFIC SUPPLIES INC.

## Current Principal Place of Business:

2890 NW 35TH STREET  
MIAMI, FL 33142 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 924578  
PRINCETON, FL 330924578

## New Mailing Address:

FEI Number: 65-0693047

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LYN, RUPERT  
12368 SW 249TH STREET  
MIAMI, FL 33032 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VT ( ) Delete  
Name: LYN-CHAMBERS, DONNA M  
Address: 12368 SOUTHWEST 249 STREET  
City-St-Zip: MIAMI, FL 33032

Title: P ( ) Delete  
Name: RUPERT L LYN,  
Address: 12368 SW 249TH ST  
City-St-Zip: MIAMI, FL 33142

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MR ( ) Change (X) Addition  
Name: LYN, RUPERT L  
Address: 12368 SW 249 ST  
City-St-Zip: MIAMI, FL 33032 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUPERT LYN

DIR

05/27/2008

Electronic Signature of Signing Officer or Director

Date