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

FILED Aug 12 1998 8:00am **CORPORATION** Secretary of State **ANNUAL REPORT** Socretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #' P96000067155 (7) EAGLE 100, INC. Principal Place of Business Mailing Address 350 ROYAL POINCIANA PLAZA 350 ROYAL POINCIANA PLAZA SUITE 3C SUITE 3C PALM BEACH FL 33480 PALM BEACH FL 33480 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/07/1996 2. Principal Place of Business 21 ZIS 5th 5th 4. FEI Number 65-0853728 2a. Mailing Address Applied For Not Applicable Suite, Apt #. etc \$8.75 Additional 108 5. Certificate of Status Desired 108 Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible US A USA [Yes 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GIORDANO, JOHN N 220 **SOUTH FRANKLIN STREET** Street Address (P.O. Box Number is Not Acceptable) 82 **TAMPA FL 33602** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.05.02 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agont and title if approache (NOTE: Angistered Agent signature required when reinstating) (10/97) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELFTE Addition TITLE 1.1 TITLE ☐ Change HEATON, LINN NAME 1.2 NAME 2000 N FLORIDA MANGO ROAD #200 STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33409 1.4 CHY-\$1-7IP CITY-ST-74P DELETE Change Addition TITLE 2.1 THE NAMÉ 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS City-St-7IP 2. 4 City-St-ZiP TITLE DELETE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CHY-ST-ZIP DELETTE TIFLE 4.1 TiTLE ☐ Change ☐ Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-\$1-ZIP Addition DELETE Change TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 10 CITY-\$1-ZIP 5.4 CITY - ST-ZIP TITLE DELETE 611006 Change Addition

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.

6.4 CITY - ST - ZIP

6.3 STREET ADDRESS

62 NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

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