## 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 # P96000082600 (3)

E.A.G.REALTY, INC.

**FILED** Jan 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				1	t ichtront ein fülle Stitt dutti until 62	::((	1218 B)))) B:	#
300 SW 107TH AVE. #202 300 SW 107TH AVE. #202								
MIAMI FL 33174 MIAMI FL 33174			1	DO NOT WRITE IN THIS SPACE				
				<u> </u> -	3. Date Incorporated or Qualified	, 110, 111, 10 01		
					10/07/1996			
2. Principal Place of Business	2a. Mailing Address		_	-	4. FEI Number		1 1	pplied For
21	26				65-0727054			ot Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.						<del> </del>	Additional
22	27				<ol><li>Certificate of Status Desired</li></ol>			equired
City & State	City & State				6. Election Campaign Financing	· ··		May Be
23	28				Trust Fund Contribution			to Fees
Zip Country	Zip	Zip Country			8. This corporation owes or has pa	id the currer		
24 25	29	30		ŀ	Personal Property Tax due June			□ Ņo
9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered Ag	ent	
GONZALEZ, ELIO A		81	1 1	Name				
300 SW 107TH AVE. #202		82	╁	Stroot Address	s (P.O. Box Number is Not Acceptab	la)		
MIAMI FL 33174		02	` `	Street Address	s (F.O. Box Number is Not Acceptate	ne)		-
		83	<b>;</b>					
		84	1	Çity			85 Zip	Code
				· · · · · · · · · · · · · · · · · · ·		FL_		
Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligate.	and 607.1508, Florida Statute f Florida. Such change was a	es, the above authorized b	ие-п y th	named corpora- ne corporation	ation submits this statement for the p 's board of directors. I hereby accep	urbose of cl ot the appoir	nanging i ntment as	ts registered registered
agent. I am familiar with, and accept the obligat	ions of, Section 607.0505, Flo	orida Statute	èS.			, ,		
SIGNATURE Signature, typed or printed name of registered agent	- della Manadanah (MANA)			signature required w		DATE		
12. OFFICERS AND		13.	JETTE S	agnature required w	ADDITIONS/CHANGES TO OFFIC		IBECTOÉ	3S IN 12
TITLE DP	DELETE	_	1.1 TITLE				Change	Addition
NAME GONZALEZ, ELIO A	_		1.2 NAME			_		
STREET ADDRESS 300 SW 107TH AVE. #202			1,3 STREET ADDRESS					
CITY-ST-ZIP MIAM! FL 33174		1.4 CITY-ST-ZIP						
TITLE DVS	DELETE	2.1 TITLE		AIF	<del></del>		Change	Addition
NAME GONZALEZ, MICHELLE		2.2 NAME				_		
STREET ADDRESS 300 SW 107TH AVE. #202		2.3 STREET ADDR		indeed				i
CITY-ST-ZIP MIAMI FL 33174		2.4 CITY-ST-ZIP						
TITLE	☐ DELETE	3.1 TITLE			<del></del>		Change	Addition
NAME		3.2 NAME				·	_	
STREET ADDRESS		3,3 STREE		indice				
CITY-SI-ZIP TITLE	DELETE	3.4. CITY - 4.1 TITLE	31-2	ZIP	· · · · · · · · · · · · · · · · · · ·	·	Change	Addition
NAME		4. 2 NAME				_	, Onlange	, , tad(iio);
STREET ADDRESS		4.3 STREE		IDDECC				
		4.4 CITY-5		I				ĺ
CITY - ST - ZIP	DELETE	5.1 TITLE	21-4	JP			Change	Addition
NAME		5.2 NAME		Ì			1 Orlange	
STREET ADDRESS		5.3 STREET		- 7				1
CITY-ST-ZIP TITLE	DELETE	5,4 CITY - S 6,1 TITLE	51 <b>-</b> Zli	.10		· -	Change	Addition
	T Dereit					<u> </u>	, ondinge	roution
NAME		6.2 NAME						1
STREET ADDRESS		6.3 STREET						J
CITY-ST-ZIP   14. I hereby certify that the information supplied with	this filling does not qualify for	6.4 CITY - S			tion 119 07/3VI) Florida Statutos I	further certifi	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. ~305-