PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

KatherineHards

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000005367

FILED Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90024 049 ***150.00

1. Corporation		, 550					1	(
EAGLE F	ROCK, INC).									
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Principal Place	e of Business		Mail	ing Address	2-6			i iaditiadi eta taret cant antin ancis ab-	(+) 011) (9(8) 0 (100 114)	B(141 1981 1981	
8551 WEST SUI		<i>207</i>	8551	iing Address West Sunrise (I Lauderdale fl	RIVD #100*	?					
FORT LAUDERD			FORT	T LAUDERDALE FL	33322						
							<u> </u>	DO NOT WRITE I	N THIS SPACE		1
							;	3. Date Incorporated or Qualifed			l
								01/16/1998			1
2. Principal P	lace of Busine	385	2a. I	Mailing Address			_	4. FEI Number	<u> </u>	plied For	1
21			26	_				Applied for		t Applicable	ļ
Suite, Apt.	#, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	¥	\$8.75 Additional	
22			27				·- ' '	of polynomia of one first a source [. Fee Re	beniup:	i
City & Staf	le			City & State				6. Election Campaign Financing	\$5.00		.
23			28					Trust Fund Contribution	Added 1	o Fees	ł
Zip		Country		Zìp	Cou	ntry	1	 This corporation owes the current y 	ear intangible		ì
24	_ `		29		30	30		Personal Property Tax.		X No	ł
	9. Name	and Address of	Current Registe	red Agent				Name and Address of New Regis	stered Agent		ł
	A-40 4 DDC	. BALL 1				81 Name	•				
	OMGARDEN		***			82 Street	Address	(P.O. Box Number is Not Acceptable)			l
		NRISE BLVD. 4									ļ
FOR	IT LAUDERU	ALE FL 33322	2	Ī		83					ĺ
						84 City			85 Zip (Code	1
									FL !		Į
11. Pursuant	to the provision	one of Sections 6	607 0502 and 607	7 1508 Florida St				ion automite this statement for the num	ose of changing its	registered	1
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office or n	egistered age	nt, or both, in the	e State of Florida e obligations of S	Such change was Section 607.0505.	atutes, the a as authorized Florida Stati	bove-named I by the com utes.	poration's	board of directors. I hereby accept the	appointment as re-	gistered	
	egistered age im familiar with	nt, or both, in the	e State of Florida e obligations of, S	Such change was Section 607.0505,	atutes, the a as authorized Florida Stati	bove-named I by the corp utes.	poration's	ion submits this statement for the purp board of directors. I hereby accept the		gistered	
SIGNATURE			e State of Florida e obligations of, S stered agent and title if a		atutes, the a as authorized Florida State NOTE: Registered			on reinstating) D	MTE		(8)
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SIGNATURE	Signature, typed o	r printed name of regis OFFICE	stered agent and tills if a	pplicable (N	NOTE: Registered	Agent signature		on reinstating) D	MTE		(11/98)
SIGNATURE	Signature, typed o	r printed name of regis	stered agent and tills if a	pplicable (N	NOTE: Registered	Agent signature		on reinstating) D	ATE RS AND DIRECTO	RS IN 12	34 (11/98)
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4. 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, with all other like empowered.

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