Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90026 043 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000052405

1. Corporation Name

EAGLE TRADING GROUP, INC.

·												
Principal Place of Business Mailing Address				- 170			(F###10	#1 148 (B(81)B)	II 96ili 89ili 6	BIN BANKI BINI		
7307 NW 79TH TERRACE		730	7307 NW 79TH TERRACE									
MEDLEY FL 33166		MEC	MEDLEY FL 33166				DO NOT WRITE IN THIS SPACE					
	4					3	Date Incom				,,,,,	
						"	06/11/19					-
2. Principal Pl	lace of Business	2a.	Mailing Address			4.	FEI Numbe	er		- •	Apr	olied For
21		26					65	- 08	1636	1 (Not	Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc		-	ج د	Certifcate of	é Status De	reirod T		\$8.75 A	dditional
22	ومهاد سينه 🖚 د د مهاد	27				3.	Certificate		131100 L	<u> </u>	Fee Red	quired
City & State	e		City & State			6.	Election Ca			٦	\$5.00	- (
23	* . *	28					Trust Fund		n		Added to	Fees
Zip	Country		Zip	Cour	itry	8.	This corpor					□No
24	25	29		30			Personal P					
	9. Name and Address of	of Current Regist	terea Agent		81 Name			_			_	
FI A\	VELL, ROBERT ESQ.					ALFO	NSO	MOA	17046	<u> </u>	CHA	JRI
	SOUTH BISCAYNE BLVE	D.			82 Street	Address (F	O.O. Box Nu	mber is Not	Acceptable	TERR		
	TE 4600	J .			83	730 T	νω			10/4/4	,	
	MI FL 33131-2310											
Trip W	1 2 00 10 1 20 10				84 City	MEDO	, P .			FL	85 Zip Ş	ode
office or re	to the provisions of Sections	the State of Florid	a. Such change was a	uthorized	by the corp	oration's be	oard of direc	tors. I here	by accept th	e appointm	ent as reg	gistered
SIGNATURE	to the provisions of Sections egistered agent or botte in tim familiar with, and accept the section of the sections of the section of the sections of the section of the section of the section of the section of the sections of the section	gistered agent and title if	f applicable. (NOTI	: Registered /	tes. Agent signature	required when	reinstating)		- 1	DATE	<u> </u>	
SIGNATURE	Signature, typed or profited name of re-		eppicable. (NOTI	E: Registered /	Agent signature	required when			- 1	DATE ERS AND	DIRECTO	R\$ IN 12
SIGNATURE	Signature, typed or profited name of re-	ngistered agent and fitte if	f applicable. (NOTI	13.	Agent signature	nedw beriuper	reinstating) ADDITIONS	/CHANGES	TO OFFIC	DATE ERS AND	DIRECTO	R\$ IN 12
SIGNATURE	Signature, typed or prysted name of recommendation of the OFFICE PSD ECHARY, ALFONSO M	egistered agent and ittle if	eppicable. (NOTI	13. 1.1 TITI 1.2 NAI	Agent signature	AL	reinstating)	/CHANGES	TO OFFIC	DATE ERS AND	DIRECTO	R\$ IN 12
SIGNATURE 12. TITLE	Signature, typed or pryfited name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA	egistered agent and ittle if	eppicable. (NOTI	13. 1.1 TITI 1.2 NAI 1.3 STR	Agent signature LE ME REET ADDRESS	AL	reinstating) ADDITIONS	/CHANGES	TO OFFIC	DATE ERS AND	DIRECTO	R\$ IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or prysted name of recommendation of the OFFICE PSD ECHARY, ALFONSO M	egistered agent and ittle if	eppicable. (NOTI	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT	Agent signature LE ME REET ADDRESS Y-ST-ZIP	AL	reinstating) ADDITIONS	/CHANGES	TO OFFIC	DATE ERS AND	DIRECTOI Change	RS IN 12
12. TITLE NAME STREET ADDRESS	Signature, typed or pryfited name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA	egistered agent and ittle if	eppicable. (NOTI	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE	AL	reinstating) ADDITIONS	/CHANGES	TO OFFIC	DATE ERS AND	DIRECTO	R\$ IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or pryfited name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA	egistered agent and ittle if	eppicable. (NOTI	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME	AL	reinstating) ADDITIONS	/CHANGES	TO OFFIC	DATE ERS AND	DIRECTOI Change	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or pryfited name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA	egistered agent and ittle if	eppicable. (NOTI	13. 1.1 TITI 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAJ 2.3 STF	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	A L	reinstating) ADDITIONS Fo V S	/CHANGES	TO OFFICE	DATE ERS AND	DIRECTOI Change	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or pryfited name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA	egistered agent and ittle if	eppicable. (NOTI	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	A L	reinstating) ADDITIONS	/CHANGES	TO OFFIC	DATE ERS AND	DIRECTOI Change CHAU	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or pryfited name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA	egistered agent and ittle if	eppicable. (NOTI	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE	A L	reinstating) ADDITIONS Fo V S	/CHANGES	TO OFFICE	DATE ERS AND	DIRECTOI Change	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Signature, typed or pryfited name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA	egistered agent and ittle if	eppicable. (NOTI	13. 1.1 TITI 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAJ 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAJ	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME	A L	reinstating) ADDITIONS	/CHANGES	TO OFFICE	DATE ERS AND	DIRECTOI Change CHAU	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or pryfited name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA	egistered agent and ittle if	eppicable. (NOTI	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME	A L	reinstating) ADDITIONS	/CHANGES	TO OFFICE	DATE ERS AND	DIRECTOI Change CHAU	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature, typed or pryfited name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA	egistered agent and ittle if	opplicable. (NOTI	13. 1.1 TITI 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAJ 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAJ 3.3 STF 3.4 CIT 3.4 CIT 3.4 CIT 3.4 CIT 3.7 TITI 3.7 NAJ 3.7 STF 3.7 CIT 3.	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP	A L	reinstating) ADDITIONS	/CHANGES	TO OFFICE	DATE ERS AND	DIRECTOI Change HAU	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or pryfited name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA	egistered agent and ittle if	eppicable. (NOTI	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4 CIT 4.1 TITI 4.1 TITI	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME	A L	reinstating) ADDITIONS	/CHANGES	TO OFFICE	DATE ERS AND	DIRECTOI Change CHAU	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or pryfied name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA MEDLEY FL 33166	egistered agent and ittle if	opplicable. (NOTI	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4 CIT 4.1 TITI 4.2 NAI	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME	A L	reinstating) ADDITIONS	/CHANGES	TO OFFICE	DATE ERS AND	DIRECTOI Change HAU	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or pryfied name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA MEDLEY FL 33166	egistered agent and ittle if	opplicable. (NOTI	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 4.1 TITI 4.2 NAI 4.3 STF	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS ME REET ADDRESS	A L	reinstating) ADDITIONS	/CHANGES	TO OFFICE	DATE ERS AND	DIRECTOI Change HAU	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or pryfied name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA MEDLEY FL 33166	egistered agent and ittle if	OPLETE DELETE D	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 4.4 CIT 4.1 TITI 4.2 NAI 4.3 STF 4.4 CIT 4.4 CIT 4.4 CIT	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	A L	reinstating) ADDITIONS	/CHANGES	TO OFFICE	DATE ERS AND I	DIRECTOI Change Change Change Change	RS IN 12 Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or pryfied name of rev OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA MEDLEY FL 33166	egistered agent and ittle if	opplicable. (NOTI	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4 CIT 4.1 TITI 4.2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.1 TITI 5.1 TITI	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS	A L	reinstating) ADDITIONS	/CHANGES	TO OFFICE	DATE ERS AND I	DIRECTOI Change HAU	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typefd or pryfited name of re- OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA MEDLEY FL 33166	egistered agent and ittle if	OPLETE DELETE D	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 4.1 TITI 4.2 NAI 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME ME REET ADDRESS Y-ST-ZIP LE ME ME REET ADDRESS	A L	reinstating) ADDITIONS	/CHANGES	TO OFFICE	DATE ERS AND I	DIRECTOI Change Change Change Change	RS IN 12 Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typefd or pryfited name of re- OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA MEDLEY FL 33166	egistered agent and ittle if	OPLETE DELETE D	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 4.1 TITI 4. 2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NA 5.3 STI	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME ME REET ADDRESS ME REET ADDRESS	A L	reinstating) ADDITIONS	/CHANGES	TO OFFICE	DATE ERS AND I	DIRECTOI Change Change Change Change	RS IN 12 Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typefd or pryfited name of re- OFFIC PSB ECHARY, ALFONSO M 7307 NW 79TH TERRA MEDLEY FL 33166	egistered agent and ittle if	OPLETE DELETE D	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 4.1 TITI 4. 2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NA 5.3 STI	Agent signature LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	A L	reinstating) ADDITIONS Fo V S	/CHANGES	TO OFFICE	DATE ERS AND I	DIRECTOI Change Change Change Change	RS IN 12 Addition Addition Addition Addition

14. I hereby certify that the information supplied with this filling 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

305-9199624 Daytime Phone #