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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000058932

1. Corporation Name EAGLE AIRCRAFT INTERIORS COMPANY



DO NOT WRITE IN THIS SPACE

Principal Place of Business 2682 W. 73RD. PLACE HIALEAH FL 33016

Mailing Address 2682 W. 73RD. PLACE HIALEAH FL 33016

3. Date Incorporated or Qualified

07/01/1998

2. Principal Place of Business

2a. Mailing Address

21 4039 NW 135 ST 22 Suite, Apt. #, etc. 27 4039 NW 135 ST Suite, Apt. #, etc.

4. FEI Number

23-00-487221-29-2

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State

28 City & State

23 OPALOCKA, FL 28 OPALOCKA, FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 33054 25 U.S.A. 29 33054 30 U.S.A.

8. This corporation owes the current year Intangible Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PUMAROL, ANGEL 2682 W. 73RD. PLACE HIALEAH FL 33016

81 Name ANGEL PUMAROL 82 Street Address (P.O. Box Number is Not Acceptable) 4039 NW 135 ST 83 84 City OPALOCKA FL 85 Zip Code 33054

11. Pursuant to the provisions of Sections 607.0502 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 agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2-18-99 DATE

Table with 5 rows and 2 columns: OFFICERS AND DIRECTORS. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETED checkbox.

Table with 6 rows and 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and checkboxes for Change and 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, with all other like empowered.

SIGNATURE: ANGEL PUMAROL 2/18/99 (305) 685-0270

CR2E034 (11/98)