


FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90021 030 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000107984

1. Corporation Name

EAGLE DOG TRADING, INC.

Principal Place of Business

8000 N.W. 31ST STREET #3
MIAMI FL 33122

Mailing Address

8000 N.W. 31ST STREET #3
MIAMI FL 33122

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/30/1998

4. FEI Number

65-0884842

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GUTIERREZ, MEDARDO
8000 N.W. 31ST STREET #3
MIAMI FL 33122

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUTIERREZ, MEDARDO	1.2 NAME	
STREET ADDRESS	8000 N.W. 31ST STREET #3	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33122	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERRER, HILDEMARO J	2.2 NAME	
STREET ADDRESS	8000 N.W. 31ST STREET #3	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33122	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERNANDEZ, JOSE A	3.2 NAME	
STREET ADDRESS	8000 N.W. 31ST STREET #3	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33122	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLIMASTORA, LUIGI A	4.2 NAME	
STREET ADDRESS	8000 N.W. 31ST STREET #3	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33122	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REQUIRED

Date

Daytime Phone #

4/14/99

CR2E034 (1/98)