5/18

FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: B.B. Munro

Jun 26, 2001 8:00 am **Secretary of State** DOCUMENT # P99000046504 1. Entity Name 05-18-2001 91550 037 ***150.00 EAGLE'S DEVELOPMENT GROUP, INC. Principal Place of Business Mailing Address 7536 NW 3RD CT. 7536 NW 3RD CT. PLANTATION FL 33317 PLANTATION FL 33317 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0926332 Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent BacBr Munro, BARRY MUNRO & THERESA MUNRO Street Address (P.O. Box Number is Not Acceptable) 7536 N.W. 3rd Court, Suite 7536 NW 3RD CT PLANTATION FL 33317 City Plantation ₹333°17 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. ☐ Addition TITLE Delete TITLE NAME NAME MUNRO, THÉRESA STREET ADDRESS STREET ADDRESS 7536 NW 3RD CT. CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33317 X Change ☐ Addition Delete TITLE TITLE Munro, B. B. 7536 NW 3rd Court NAME MUNRO, THERESA NAME STREET ADDRESS 7536 NW 3RD CT STREET ADDRESS Plantation, FL. 33317 CITY-ST-7IP CITY-ST-ZIF PLANTATION FL 33317 ☐ Change · 🔲 Addition TITLE '[X] Delete VDS-MLE? MUNRO, BARRY NAME MAME STREET ADDRESS STREET ADDRESS 7536 NW 3RD CT CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33317 ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CER OR DIRECTO