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

PROFIT Mar 25 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** S62419 EAGLE AUTOMOTIVE PRODUCTS, INC. Principal Place of Business Mailing Address 963 SOUTH MILITARY TRAIL 1301 SW 2ND STREET WEST PALM BEACH FL 33415 POMPANO BEACH FL 33069 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>06/21/1991</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0272134 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5, Certificate of Status Desired 22 Fee Regulred 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HRENICK, ANDREW 1301 S.W. 2ND STREET 82 Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33069 83 84 City 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition NAME HRENICK, MICHELE 1.2 NAME 7931 REDWOOD LANE STREET ADDRESS 1.3 STREET ADDRESS PARKLAND FL 33076 CITY-ST-ZIP 1.4 City-ST-ZIP DELETE TITLE 2.1 TITLE ☐ Change Addition SPERLING, NORMAN NAME 2.2 NAME 5163 NW 100TH AVENUE STREET ADDRESS 2.3 STREET ADDRESS **CORAL SPRINGS FL 33076** CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE Change Addition 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETÉ Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY+ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIF 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.

SOFOLINA

**FILED**