

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23603

FILED
Feb 19, 2004
Secretary of State

Entity Name: EAGLE STRATEGIES CORP.

Current Principal Place of Business:

1180 AVENUE OF AMERICAS
3RD FLOOR
NEW YORK, NY 10036 US

New Principal Place of Business:

Current Mailing Address:

51 MADISON AVE
ROOM 2212
NEW YORK, NY 10010 US

New Mailing Address:

FEI Number: 13-3475906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MATHAS, THEODORE
Address: 51 MADISON AVE
City-St-Zip: NEW YORK, NY 10010

Title: P () Delete
Name: LEAHY, MICHAEL
Address: 335 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: AS () Delete
Name: MEIROWITZ, MARK
Address: 51 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: T () Delete
Name: CALHOUN, JAY S
Address: 51 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: S () Delete
Name: GOMEZ, MARK A
Address: 51 MADISON AVE
City-St-Zip: NEW YORK, NY 10010

Title: C () Delete
Name: ROCCHI, GERARD A
Address: 51 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PCEO (X) Change () Addition
Name: LEAHY, MICHAEL
Address: 335 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SV/T (X) Change () Addition
Name: CALHOUN, JAY S
Address: 51 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: VP/S (X) Change () Addition
Name: GOMEZ, MARK A
Address: 51 MADISON AVE
City-St-Zip: NEW YORK, NY 10010

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK MEIROWITZ

AS

02/19/2004

Electronic Signature of Signing Officer or Director

_____ Date