

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003845

FILED
Apr 15, 2004
Secretary of State

Entity Name: IRISH AMERICAN MANAGEMENT SERVICES LIMITED, INC.

Current Principal Place of Business:

603 SARASOTA QUAY
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

603 SARASOTA QUAY
SARASOTA, FL 34236

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAREAU, JEFF
603 SARASOTA QUAY
SARASOTA, FL 34236

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: C () Delete
Name: GAREAU, RENE
Address: 128 LOWER BAGGOT ST.
City-St-Zip: DUBLIN 2, IRELAND,

Title: DPS () Delete
Name: KELLY, PATRICK
Address: 128 LOWER BAGGOT ST.
City-St-Zip: DUBLIN 2, IRELAND,

Title: D () Delete
Name: MCCABE, JOHN
Address: RATH STUB HOUSE, ASHORE
City-St-Zip: COUNTY MEATH, IRELAND,

Title: DVP () Delete
Name: GAREAU, JEFFREY
Address: 128 LOWER BAGGOT ST.
City-St-Zip: DUBLIN 2, IRELAND,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JEFFREY GAREAU

DVP

04/15/2004

Electronic Signature of Signing Officer or Director

_____ Date