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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	1998	DIVISION OF CO	DRPORATIONS	Scoretary	of State
DOCUI 1. Corporatio LOUGH	MENT # K97219 Name IREN AND DOYLE, P.A.	9 (5)			
Principal Plac	e of Business	Mailing Address			I BLOST GIGTS BEBSS BEOST BEOST 1801
315 SE 11TH ST 315 SE 11TH ST					
FT LAUDERDALE FL 33316 FT LAUDERDALE FL 33316				DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualified 06/21/1989	
<u> </u>	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# atc	Suite, Apt. #, etc.		65-0128681	Not Applicable \$8.75 Additional
22	n, 0 ,0	27		5. Certificate of Status Desired	Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 3	Country	This corporation owes or has paid the Personal Property Tax due June 30.	e cover it year Intangible Yes No
24	9. Name and Address of Current		100	10. Name and Address of New Registe	
LO	UGHREN, JOSEPH M.		81 Name		
ALE OF LITH CIDERT				ess (P.O. Box Number is Not Acceptable)	
FT. LAUDERDALE FL 33316					
1			83		
:			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607, 1508. Florida Statules	the above-named corp	oration submits this statement for the purpo	se 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 probet name of registered ager		Registered Agent signature require		
12.	OFFICERS AND	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	LOUGHREN, JOSEPH M.	() been t	1,2 NAME		change nacinon
STREET ADDRESS	315 SE 11 ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY - \$1 - ZIP		
TITLE	D	- DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DOYLE, RICHARD B. JR		2.2 NAME		
STREET ADDRESS	315 SE 11 ST FT LAUDERDALE FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	FI LAUDENDALE FL	DELETE	2. 4 C/TY-ST-Z/P 3.1 TITLE		Change Addition
NAME		L.J pecere	3.2 NAME		C Augusta C Languagu
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3 4. CITY-ST-7IP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE NAME		ال مردورة	5.1 TITLE 5.2 NAME		T CHANGE T MOUNTON
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		ļ
STREET ADDRESS			6.3 STREET ADDRESS		j
CITY-ST-ZIP			6.4 CITY-ST-7IP		

14. Thereby 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 an attachment with an address.

.....

punh mot

4/28/98

FILED

May 18 1998 8:00am

Secretary of State