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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700006374 (9)

FILED Apr 06 1998 8:00am Secretary of State

DAVID	W. IRISH CO., INC.					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Principal Plac	e of Business	Mailing Address			יוד ום ה הנוסס הנוסס אנוסס ונחסג והקד סוור ססגנסטו ו	- וכפר ועום וופטר וומורם פונע בוועם ו
3479 SW SUNSET TRACE CIRCLE 3479 SW SUNSET TRACE C PALM CITY FL 34990 PALM CITY FL 34990					DO NOT WRITE IN TH	IIS SPACE
					3. Date Incorporated or Qualified	
				<u> </u>	12/03/1997	
_	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		_ 	16-1363336	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 28					Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the	- · - ·
24	25	29	30		Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No
454	g, Name and Address of Curre	Hit Hegistered Agent		81 Name	10. Name and Address of New Register	ed Agent
	SH, DAVID W		ł	1 Tarrio		
3479 SW SUNSET TRACE CIRCLE				82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
PALM CITY FL 34990			ŀ	B3		
				<u> </u>		
				84 City		85 Zip Code
11 Pursuant	to the provisions of Sections 607 05	02 and 607 1508 Florida State	utes the ab	ove-named co		
office of s	egistered agent, or both, in the Stat	e of Florida Such changes as	authorized	by the corpor	orporation submits this statement for the purpos ration's board of directors. I hereby accept the	appointment as registered
	m familiar with, and accept the beli	gations of, Section 607.0508.1	Elonda Stat	utes.	-	
SIGNATURE	Signature spend or product name of registered a	goril and little if applicable (NC	OTE Registered	Agent signature rec	guired when reinstating) DAT	1000
12.	<u> </u>	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	P	DELETE	1,1 70	LE		AND DIRECTORS IN 12 Section Change Addition Change Addition Change Addition Change C
NAME	irish, david w			ME		
ALTA OUL OLIVIORE TO LOC OLDOLE			1.2 NA			76
CITY-ST-ZIP		CIRCLE	B	REET ADDRESS		, Pool
	PALM CITY FL 34990		1.3 ST	REET ADDRESS Y-ST-ZIP		95E
TITLE		CIRCLE	1.3 ST	Y-ST-ZIP		☐ Change ☐ Addition
			1.3 ST 1.4 C(1	Y-ST-ZIP		92
TITLE			1.3 ST 1.4 CH 2.1 TH 2.2 NA	Y-ST-ZIP		92
TITLE NAME		☐ DELETE	1.3 ST 1.4 CH 2.1 TH 2.2 NA 2.3 ST 2.4 CH	Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP		☐ Change ☐ Addition
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14. I nereby 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.

SIGNATURE:

O DE PRINTEO NAME OF SIGNING OFFICER OR DIRECTOR

2/10/38

561-622-9533