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Apr 09 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H14390 (9)

1. Corporation Name  
IRENE MARIE, INC.

Principal Place of Business  
728 OCEAN DR  
W. H. MILMOE, TREASURER  
MIAMI BCH FL 33139

Mailing Address  
728 OCEAN DR  
W. H. MILMOE, TREASURER  
MIAMI BCH FL 33139-6220

3. Date Incorporated or Qualified 07/30/1984	3a. Date of Last Report 02/27/1996
4. FEI Number 59-2452039	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
HIRT, JEROME A 728 OCEAN DR MIAMI BEACH FL 33139		81. Name Maria Travieso	85. Zip Code 33139
		82. Street Address (P.O. Box Number is Not Acceptable) 728 Ocean Drive	
		83. City	
		84. City Miami Beach	

13. Pursuant to the provisions of Section 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 *Maria Travieso* Maria Travieso 3/31/97  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARIE, IRENE	1.2 NAME	
STREET ADDRESS	728 OCEAN DR	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI BCH FL	1.4 CITY - ST - ZIP	
TITLE	TS	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HIRT, JEROME A	2.2 NAME	
STREET ADDRESS	728 OCEAN DR	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI BCH FL	2.4 CITY - ST - ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARIE, PATRICK	3.2 NAME	
STREET ADDRESS	728 OCEAN DR	3.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI BCH FL	3.4 CITY - ST - ZIP	
TITLE	EVP	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'DAWD, WILLIAM	4.2 NAME	
STREET ADDRESS	728 OCEAN DRIVE	4.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI BEACH FL	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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.

SIGNATURE: *1422 + [Signature]* 3/31/97 (305) 672-2929  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
0191534

CR2E034 (9/96)