

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
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95 MAY -1 AM 10:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mayhew
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L39487 (8)

1. Corporation Name

IRELAND TRACT 58, INC.

Principal Place of Business

% R. SCOTT IRELAND
1125 125TH ST
N. MIAMI FL 33161

Mailing Address

% R. SCOTT IRELAND
1125 125TH ST
N. MIAMI FL 33161

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1990

3a. Date of Last Report

04/29/1994

4. FEI Number

65-0173998

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 12000 Biscayne Blvd.

2a. Mailing Address

26 12000 Biscayne Blvd.

Suite, Apt. #, etc

Suite, Apt. #, etc

22 Suite 810

27 Suite 810

City & State

City & State

23 Miami, FL

28 Miami, FL

Zip

Country

Zip

Country

24 33181

25 Dade

29 33181

30 Dade

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

IRELAND, R. SCOTT
1125 N.E. 125TH ST
N. MIAMI FL 33161

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

12000 Biscayne Blvd., Suite 810

83

84 City

Miami

FL

85 Zip Code

33181

11. Pursuant to the provisions of Sections 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

Signature of person or persons named in registered agent and title if applicable

Signature of Registered Agent (signature required and other identifying)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
DPS	IRELAND, R. SCOTT	1125 N.E. 125TH ST	N. MIAMI FL
V	BEINING, LOU	1125 N.E. 125TH ST.	N. MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY, ST, ZIP
XX Change ☐ Addition		12000 Biscayne Blvd., Suite 810	Miami, FL 33181-2742
XX Change ☐ Addition		12000 Biscayne Blvd., Suite 810	Miami, FL 33181-2742
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
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☐ Change ☐ Addition			

600001485686

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***6916.25 ***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption status in Section 119.07(3)(b), Florida Statutes. I further certify that the information contained 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, upon an attachment with an address.

SIGNATURE:

Lou Beining

Lou Beining

4/27/95

305-891-6806

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

TELEPHONE NUMBER