

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000009093

FILED  
Jan 22, 2004  
Secretary of State

Entity Name: EIRE INVESTMENTS FLORIDA L.L.C.

**Current Principal Place of Business:**

2840 NW BOCA RATON BLVD.  
SUITE 102  
BOCA RATON, FL 33431

**New Principal Place of Business:**

2799 NW BOCA RATON BLVD.  
SUITE 203  
BOCA RATON, FL 33431

**Current Mailing Address:**

2840 NW BOCA RATON BLVD.  
SUITE 102  
BOCA RATON, FL 33431

**New Mailing Address:**

2799 NW BOCA RATON BLVD.  
SUITE 203  
BOCA RATON, FL 33431

FEI Number: 65-0969248

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPILLANE & COMPANY, INC.  
2840 NW BOCA RATON BLVD., SUITE 102  
BOCA RATON, FL 33431

**Name and Address of New Registered Agent:**

THE EIRE COMPANIES, INC.  
2799 NW BOCA RATON BLVD.  
SUITE 203  
BOCA RATON, FL 33431

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: MARK SPILLANE

01/22/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: SPILLANE, MARK  
Address: 2840 NW BOCA RATON BLVD., SUITE 102  
City-St-Zip: BOCA RATON, FL 33431

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SPILLANE, MARK  
Address: 2799 NW BOCA RATON BLVD. SUITE 203  
City-St-Zip: BOCA RATON, FL 33431

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARK SPILLANE

MGR

01/22/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date