


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 30, 2004 8:00 am**  
**Secretary of State**

04-30-2004 90253 027 \*\*\*150.00

**DOCUMENT # P03000024948**

1. Entity Name  
 IRELAND 4580, INC.



Principal Place of Business Mailing Address  
 120000 BISCAYNE BOULEVARD 120000 BISCAYNE BOULEVARD  
 SUITE 810 SUITE 810  
 MIAMI, FL 33181 MIAMI, FL 33181

**J4U73061**



2. Principal Place of Business 3. Mailing Address  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
 City & State City & State

02062004 Chg-P CR2E034 (10/03)

4. FEI Number Applied For  
 14-1872707 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 DUBIN, JOSHUA L  
 PENTHOUSE SUITE 810  
 12000 BISCAYNE BOULEVARD  
 MIAMI, FL 33181

7. Name and Address of New Registered Agent  
 Name R. Scott Ireland  
 Street Address (P.O. Box Number is Not Acceptable)  
12000 Biscayne Blvd., #810  
 City Miami FL Zip Code 33181

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [Signature] R. SCOTT IRELAND 305-891-6806  
Signature, hand or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when registering.) DATE

**FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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		PDST R. Scott Ireland 12000 Biscayne Blvd., #810 Miami, FL 33181	
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		VP Lou Ireland 12000 Biscayne Blvd., #810 Miami, FL 33181	
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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lou Ireland, VP LOU IRELAND 4-12-04 305-891-6806  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #