

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000076579

FILED  
Aug 08, 2012  
Secretary of State

**Entity Name:** THE BLACK ROSE IRISH PUB INC.

**Current Principal Place of Business:**

234 SOUTH FEDERAL HIGHWAY  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

**Current Mailing Address:**

234 SOUTH FEDERAL HIGHWAY  
BOCA RATON, FL 33432 US

**New Mailing Address:**

FEI Number: 45-3140593

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOSHGARIAN, MICHELLE  
394 SW 33RD TERRACE  
DEERFIELD BEACH, FL 33442 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P, T  
Name: GOSHGARIAN, MICHELLE  
Address: 234 SOUTH FEDERAL HIGHWAY  
City-St-Zip: BOCA RATON, FL 33432 US

Title: D  
Name: GOSHGARIAN, MICHELLE  
Address: 234 SOUTH FEDERAL HIGHWAY  
City-St-Zip: BOCA RATON, FL 33432 US

Title: S, D  
Name: GOSHGARIAN, MICHAEL  
Address: 234 SOUTH FEDERAL HIGHWAY  
City-St-Zip: BOCA RATON, FL 33432 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHELLE GOSHGARIAN

P

08/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date