FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000014224 (8)

EIREANN, INCORPORATED

N.Mr

STREET ADDRESS

CITY - ST - ZIP

Principal Place of Business		Mailing Address	Mailing Address			1 1700 FIOLI 180 (87000 11511 DOLLA (8076) (8076)	HORIDA IIDA SI		A 8181 (00)
1935 HOWELL BRANCH RD WINTER PARK FL 32789		1335 HOWELL BRANCH RD WINTER PARK FL 32788-1115				÷,			
						3. Date Incorporated or Qualified 02/25/1993		of Last R 7/1996	leport
	Place of Business	· 2a. Mailing Address				4. FEI Number			oplied For
21	· · · · · · · · · · · · · · · · · · ·	26				59-3167109		No	ot Applicable
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired		•	Additional equired
City & Stat 23	CC	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	Zıp 29	Cour 30	try		This corporation has liability for i Florida Statutes	intangible ta		. 199.032,
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered Ag	ent	
	LY, FRANK 5 HOWELL BRANCH RD		L	B1 Nan B2 Stre		ss (P.O. Box Number is Not Acceptab		 	
WIN	TER PARK FL 32789		L	33	- Audib	ss (r. O. box Number is mor Acceptab			
									·
			1	B4 City			FL	· · ·	Code
11. Pursuant office or r agent La SIGNATURE	to the provisions of Sections 607.05 registered agent, or both, in the Stat im familiar with, and accept the obliq	02 and 607.1508, Florida Statu e of Florida. Such change was gations of, Section 607.0505, Fi	tes, the ab authorized lorida Statu	ove-nam by the c tes.	ed corpoi orporatio	ration submits this statement for the p n's board of directors. I hereby accep	urpose of cl at the appoir	nanging It ntment as	s registered registered
	Signature typed or printed name of registered ag			Agent signa	ture required	when reinstaling)	DATE		
12.		ND DIRECTORS DELETE	13.	 		ADDITIONS/CHANGES TO OFFIC			
NAME .	STD REILLY, FRANK	L.J Deten	1.1 TITI. 1.2 NAM			•	٠ اــ	_] Change	Addition
STREET ADORESS	1335 HOWELL BRANCH RD			ic Eet addres					
City St 20	WINTER PARK FL 32789			ce i adumec /-ST-ZIP	»				
TITLE	P	DELETE	2.1 7(7)					Change	Addition
NAME	MCGOONA, DANIEL J		2.2 NA	AE	İ			_ •	-
STREET ADDRESS	12631 RINWOOD AVE		2.3 STR	EET ADDRES	is				
CITY-ST-ZIP	ORLANDO FL 32837		2. 4 CIT	Y-ST-ZIP	_				
TITLE.		DELETE	3.1 7(7)	E				Change	Addition
NAME			3.2 NAN	łE.	İ				
STHEFT ADDRESS			3.3 STR	EET ADDRES	s				
CITY - ST - ZIP			3.4. C/T	Y-ST-ZIP					
THILE		☐ DELETE	4.1 TITL	E				Change	Addition
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STR	EET ADDRES	S				
C-14 - ST - 7IP				-ST-ZIP					
TITLE		☐ DELETE	5.1 111				Ľ	Change	Addition
NAME			5.2 NAM	IE.	1				
STREET ADDRESS			5.3 STR	EET ADDRES	s				
CrTY - S1 - ZIP				- ST - ZIP					
TITLE		DELETE	6 1 TITL	Ε				Change	Addition

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.

63 STREET ADDRESS

64 CITY-ST-ZIP

62 NAME

SIGNATURE: WANT THE AND THE USING OF SIGNING OFFICE OR CHAPTER OR PROPERTY OF THE AND THE USING OFFICE OR CHAPTER OR CHAP