


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 31, 2005 8:00 am**  
**Secretary of State**

01-31-2005 90051 028 \*\*\*150.00

**DOCUMENT # P93000058844**

1. Entity Name  
 IRISH ELECTRIC, INC.




Principal Place of Business  
 8839 SONOMA LAKE BLVD  
 BOCA RATON, FL 33434-4070

Mailing Address  
 8839 SONOMA LAKE BLVD  
 BOCA RATON, FL 33434-4070

**DO NOT WRITE IN THIS SPACE**

10000010



01122005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0432133	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

IRISH, JAMES  
 8839 SONOMA LAKE BLVD  
 BOCA RATON, FL 33434-4070

**DO NOT WRITE IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

**FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00**

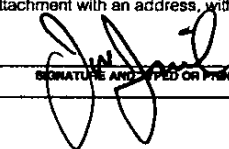
9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD IRISH, JAMES W 8839 SONOMA LAKE BLVD BOCA RATON, FL 334344070
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**DO NOT WRITE IN THIS SPACE**

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:  James W. Irish 1/24/05 561-477-8719  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #