

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000082879 (6)

1. Corporation Name

BLACK IRISH CHARTER, INC.



Principal Place of Business

2724 NE 15 ST
FORT LAUDERDALE FL 33304
US

Mailing Address

2724 NE 15 ST
SUITE #6
FORT LAUDERDALE FL 33304
US

2. Principal Place of Business

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State, Apt. #, etc.

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City & State

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Zip

Country

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9. Name and Address of Current Registered Agent

MALONEY, MICHAEL
2720 NE 15TH STREET
FORT LAUDERDALE FL 33304

2a. Mailing Address

26

State, Apt. #, etc.

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City & State

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Zip

Country

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3. Date Incorporated or Qualified

11/29/1993

3a. Date of Last Report

02/03/1995

4. FET Number

65-0472585

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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84 City

FL

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Zip Code

11. Pursuant to the provisions of Sections 607 (c)(3) and (c)(7), 1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am:

SIGNATURE

12. Signature of Officer or Director

13. Signature of Registered Agent

12. Signature of Officer or Director

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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. 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 attached sheet with an address.

SIGNATURE:

Michael Maloney
MICHAEL MALONEY

19 JAN '96 305561269

CR2E034 (12/95)