

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000090955

1. Corporation Name

Pubs of Erin, Inc.

Principal Place of Business

Mailing Address

903 E. Bloomingdale Ave
Brandon, FL 33511

729 Fortuna Dr.
Brandon, FL 33511

3. Date Incorporated or Qualified

11/28/95

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 903 E. Bloomingdale Ave

26 729 Fortuna Dr.

4. FEI Number

59-3348213

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Brandon FL

28 Brandon FL

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip Country

Zip Country

24 33511

25 Hillsborough

29 33511

30 Hillsborough

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

Richard B. Hadlow
220 South Franklin St
Tampa, FL 33602

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P/S/D DELETE

NAME SANDRA L. HACKETT
STREET ADDRESS 729 Fortuna Dr.
CITY-ST-ZIP Brandon, FL 33511

TITLE V/T/D DELETE

NAME Robert H. Carlisle
STREET ADDRESS 6221 Sleepy Hollow Lane
CITY-ST-ZIP Lisle, Illinois 60532

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/S/D Change Addition

1.2 NAME SANDRA L. HACKETT
1.3 STREET ADDRESS 729 Fortuna Dr.
1.4 CITY-ST-ZIP Brandon, FL 33511

2.1 TITLE V/T/D Change Addition

2.2 NAME Robert H. Carlisle
2.3 STREET ADDRESS 6221 Sleepy Hollow Lane
2.4 CITY-ST-ZIP Lisle, Illinois 60532

3.1 TITLE Change Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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***200.00

5.1 TITLE Change Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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

SIGNATURE:

Sandra L. Hackett, President

4/15/96 (813) 689-0777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #