

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000084414

1. Entity Name
IRG GROUP, INC.



Principal Place of Business
3800 S. OCEAN DRIVE
SUITE 235
HOLLYWOOD, FL 33019

Mailing Address
3800 S. OCEAN DRIVE
SUITE 235
HOLLYWOOD, FL 33019



04272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0710479

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GOLDWYN, OWEN L
3800 S. OCEAN DRIVE
SUITE 235
HOLLYWOOD, FL 33019

**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 reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

NAME PD
GOLDWYN, OWEN L
STREET ADDRESS 3800 S. OCEAN DRIVE
CITY-STATE-ZIP HOLLYWOOD, FL 33019

NAME SD
APELL, DOROTHY
STREET ADDRESS 3800 S. OCEAN DRIVE
CITY-STATE-ZIP HOLLYWOOD, FL 33019

NAME VPD
APELL, JOSEPH
STREET ADDRESS 3800 S OCEAN DRIVE
CITY-STATE-ZIP HOLLYWOOD, FL

NAME
STREET ADDRESS
CITY-STATE-ZIP

NAME
STREET ADDRESS
CITY-STATE-ZIP

NAME
STREET ADDRESS
CITY-STATE-ZIP

000000149503
05/03/04-80189-019 150.00

**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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-2004

Date

9544970606

Daytime Phone #