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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P97000001939 (2) DOCUMENT #

IRGONE ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED Feb 02 1998 8:00am Secretary of State



581 SE 13 STREET #103 581 SE 13 STREET #103 DANIA FL 33004 DANIA FL 33004 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/02/1997 2. Principal Place of Business 2a. Mailing Address Applied For - 0720 240 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes ☐ No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BEAUDOIN, LINDA 581 SE 13 STREET #103 82 Street Address (P.O. Box Number is Not Acceptable) DANIA FL 33004 83 City 85 Zip Code 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 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Change Addition 1.1 TITLE President NAME 1.2 NAME inda BeaudixVI STREET ADDRESS 581 SE 1311. St. * 103 1.3 STREET ADDRESS CITY-ST-ZIP Florida 33004 1.4 CITY - ST - ZIP erretary TITLE DELETE Addition 2.1 TITLE NAME Daniel Bienvenue 22 NAME STREET ADDRÉSS 23 STREET ADDRESS SE 13th, 51.# 103 CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change TITLE Addition 5.1 TITLE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. 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 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 Plock 13 or Plock 14 or Plock 1 Block 12 or Block 13 if changed, or on an attachment with an address.