

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90166 020 ***150.00

DOCUMENT # P98000028043

1. Corporation Name
IRNA CORP.

Principal Place of Business
2868 CORAL SPRINGS DRIVE
CORAL SPRINGS FL 33065

Mailing Address
2868 CORAL SPRINGS DRIVE
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/25/1998

4. FEI Number
65-0824078

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

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

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business
21 9308 KETAY Circle
Suite, Apt. #, etc.

2a. Mailing Address
26 9308 KETAY Circle
Suite, Apt. #, etc.

22 City & State
23 BOCA RATON

27 City & State
28 BOCA RATON FL

24 FL 25 33428

29 33428 30 PAUL BOK

9. Name and Address of Current Registered Agent

KAMENETSKY, IRINA
2868 CORAL SPRINGS DRIVE
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name SHNAPER NATALIA
82 Street Address (P.O. Box Number is Not Acceptable)
9308 KETAY Circle
83
84 City BOCA RATON FL 85 Zip Code 33428

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 Shnaper / N. SHNAPER 2/2/99
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 D ☒ DELETE
NAME KAMENETSKAY, IRENA
STREET ADDRESS 2868 CORAL SPRINGS DRIVE
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE D ☐ DELETE
NAME SHNAPER, NATALIA
STREET ADDRESS 10328 BOCA ENTRADA BLVD. APT. 206
CITY-ST-ZIP BOCA RATON FL 33428

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 ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

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 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Shnaper / N. SHNAPER 2/2/99 (561) 488-1184
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)