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

FILED Apr 29 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (6)S08025 O'FARRELLS IRISH PUB & RESTAURANT, INC. Principal Place of Business Mailing Address 1407 GULF BLVD. 1407 GULF BLVD. INDIAN ROCKS BEACH FL 34635 INDIAN ROCKS BEACH FL 34635 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/22/1990 2. Principal Place of Business 2a, Mailing Address Applied For 21 59-3036987 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6 Flection Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζiρ Country Country 8. This corporation owes or has paid the current year intangible 24 25 29 30 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name WICKS, VALERIE 1407 GULF BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) INDIAN ROCKS BEACH FL 34635 83 84 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change ___ Addition TITLE 1.1 TITLE WICK, VALERIE NAME 1.2 NAME 1407 GULF BLVD. STREET ADDRESS 1.3 STREET ADDRESS INDIAN ROCKS BEACH FL 34635 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 2.1 TITLE WICK, ROBERT NAME 2.2 NAME STREET ADDRESS 1407 GULF BLVD. 2.3 STREET ADDRESS INDIAN ROCKS BEACH FL 34835 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 City-St-ZiP DELETE Addition TITLE 4.1 TITLE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS

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.

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

VALERIE WICKS

0407416

Change

Addition