FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 29 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # S89556 I.R.I. MANAGEMENT CO., INC. Principal Place of Business Mailing Address 1250 NW 62ND STREET P.O. BOX 015222 MIAMI FL 33101 DO NOT WRITE IN THIS SPACE MIAMI FL 33142 3. Date Incorporated or Qualified 10/24/1991 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 269 N. W. 7th St 269 N. W. 7th St 65-0298516 Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Stafus Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 <u>Miami</u> Miami. Country Country 8. This corporation owes or has paid the current year Intangible Yes □ No Personal Property Tax due June 30. 24 26 29 30 US 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WEITZEL, TED H. 269 NW 7TH STREET Street Address (P.O. Box Number is Not Acceptable) SUITE 416 63 **MIAM! FL 33136** 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 little if applicable (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE Change TITLE 1.1 TITLE NAME WEITZEL, RANDALL J. 1.2 NAME 269 NW 7TH STREET, STE. 416 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 2.1 TITLE TITLE NAME DAVIS, HORACE C. 2.2 NAME STREET ADDRESS 310 SW 68TH BLVD 2.3 STREET ADDRESS PEMBROKE PINES FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE DS 31 TITLE NAME WEITZEL, TED 3.2 NAME 269 NW 7TH ST #416 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3 4. CITY-ST-2IP DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition Change TETLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-SY-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE 62 NAME NAME

SIGNATURE:

14. I hereby certify that the information supplied with this filing does not qualify for

indicated on this annual report or supplemental annual report is true and acculofficer or director of the condoration or the receiver or trustee empowered to ellock 12 or Block 13 if chipped, or on an attachment with an address

STREET ADDRESS

CITY-ST-ZIP

Ted H. Weitzel

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

4-20-98

ne exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

te and that my signature shall have the same legal effect as if made under oath; that I am an cute this report as required by Chapter 607, Florida Statutes; and that my name appears in

305-358-803d