

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 22 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F97000004939 (1)

1. Corporation Name
 HR2, INC.



Principal Place of Business
 100 FIFTH AVE.
 WALTHAM MA 02254

Mailing Address
 100 FIFTH AVE.
 WALTHAM MA 02254

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
 09/22/1997

4. FEI Number
 04-3382551

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business
 21 Suite, Apt. #, etc.
 22 City & State
 23 Zip
 24 Country

2a. Mailing Address
 26 Suite, Apt. #, etc.
 27 City & State
 28 Zip
 29 Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 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)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	LYNN, WAYNE R	
STREET ADDRESS	100 FIFTH AVE.	
CITY-ST-ZIP	WALTHAM MA 02254	
TITLE	D	DELETE
NAME	ZULEK, RICHARD S JR.	
STREET ADDRESS	100 FIFTH AVE.	
CITY-ST-ZIP	WALTHAM MA 02254	
TITLE	D	DELETE
NAME	WALTER, JAMES M	
STREET ADDRESS	100 FIFTH AVE.	
CITY-ST-ZIP	WALTHAM MA 02254	
TITLE	D	DELETE
NAME	STIFFLER, DAVID B	
STREET ADDRESS	100 FIFTH AVE.	
CITY-ST-ZIP	WALTHAM MA 02254	
TITLE	AT	DELETE
NAME	SENNOTT, JOHN L	
STREET ADDRESS	100 FIFTH AVE.	
CITY-ST-ZIP	WALTHAM MA 02254	
TITLE	S	DELETE
NAME	KENEALY, EDMUND C	
STREET ADDRESS	100 FIFTH AVE.	
CITY-ST-ZIP	WALTHAM MA 02254	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P	Change	Addition
1.2 NAME	Lynn, Wayne R.		
1.3 STREET ADDRESS	100 Fifth Avenue		
1.4 CITY-ST-ZIP	Waltham, MA 02254		
2.1 TITLE	D	Change	Addition
2.2 NAME	Flood, Thomas J.		
2.3 STREET ADDRESS	300 S Tamiami Trail N., # 400		
2.4 CITY-ST-ZIP	Naples, FL 34103		
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE	VP	Change	Addition
4.2 NAME	Stiffler David B.		
4.3 STREET ADDRESS	100 Fifth Avenue		
4.4 CITY-ST-ZIP	Waltham, MA 02254		
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE	S/T/VP	Change	Addition
6.2 NAME	Kenealy, Edmund C		
6.3 STREET ADDRESS	100 Fifth Avenue		
6.4 CITY-ST-ZIP	Waltham, MA 02254		

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.

SIGNATURE

[Handwritten Signature]

7/6/98 581-672-2012

CR2E034 (5/98)