

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

**FILED**

**May 06 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P29620 (2)**

1. Corporation Name  
**PIPER INDUSTRIES OF TEXAS, INC.**



Principal Place of Business <b>7578 PRESIDENTS DRIVE ORLANDO FL 32809 US</b>	Mailing Address <b>7578 PRESIDENTS DRIVE ORLANDO FL 32809 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
25. Country	30. Country

3. Date Incorporated or Qualified <b>06/05/1990</b>	
4. FEI Number <b>75-1966915</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81. Name <b>ANTONIO LEMUS, CPA</b>	
82. Street Address (P.O. Box Number is Not Acceptable) <b>112 MARCIA DRIVE</b>	
83. City <b>ALTAMONTE SPRINGS</b>	
84. State <b>FL</b>	85. Zip Code <b>32714</b>

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 Antonio Lemus CPA (NOTE: Registered Agent signature required when re-instating) DATE 4/27/98

12. OFFICERS AND DIRECTORS

TITLE	SD	<input type="checkbox"/> DELETE
NAME	PIPER, SHIRLEY	
STREET ADDRESS	7452 PRESIDENTS DRIVE	
CITY-ST-ZIP	ORLANDO FL 32809	
TITLE	PCEO	<input type="checkbox"/> DELETE
NAME	PIPER, PAUL P JR	
STREET ADDRESS	7452 PRESIDENTS DRIVE	
CITY-ST-ZIP	ORLANDO FL 32809	
TITLE	CFO	<input checked="" type="checkbox"/> DELETE
NAME	LAMBERT, PHILLIP E. C	
STREET ADDRESS	7452 PRESIDENTS DRIVE	
CITY-ST-ZIP	ORLANDO FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	7578 PRESIDENTS DRIVE
1.4 CITY-ST-ZIP	ORLANDO, FL 32809
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	PD
2.3 STREET ADDRESS	7578 PRESIDENTS DRIVE
2.4 CITY-ST-ZIP	ORLANDO, FL 32809
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	LYNN McCORMACK
4.3 STREET ADDRESS	7578 PRESIDENTS DRIVE
4.4 CITY-ST-ZIP	ORLANDO, FL 32809
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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, with an attachment with an address.

SIGNATURE Antonio Lemus CPA Paul P. Piper Jr 4-27-98 467-857-1111

CF2E034 (10/97)