FIL	E NOW: FILING FEE	AFTER MA	Y 1ST IS	\$ \$550.00	• FILED
i	PROFIT RPORATION UAL REPORT 1998		Sandra B. Secretary		Jan 29 1998 8:00am
1. Corporation	MENT # V6086 IRE RESEARCH, INC.	7	(1)		
Principal Place of Business Mailing Address 5450 NW 33 AVE 22459 WATERSIDE DR. 102TE BOCA RATON FL 33428 FORT LAUDERDALE FL 33309 US					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
2. Principal F 21 Suite, Apt	Place of Business	2a. Mailing A			08/31/1992 4. FEI Number Applied For Not Applied For Not Applicable
22 City & Sta 23	te	27 City & St	ate		6. Election Campaign Financing \$5.00 May Be
Zip 24	Country 25 9. Name and Address of Currer	28 Zip 29		Country	Trust Fund Contribution Added to Fees  8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
BC	459 WATERSIDE DR.  CA RATON FL 33428  to the provisions of Sections 607.050  registered agent, or both, in the State  and familiar with, and accept the obligi	2 and 607 1508, F of Florida. Such c ations of, Section 6	Torida Statutes hange was au 507,0506, Flori	83 84 City	y  FL 85 Zip Code  ned corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age				tature required when reinstating) DATE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEMEO, MICHAEL 22459 WATERSIDE DR BOCA RATON FL	D DIRECTORS	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP			DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP			DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			i delete	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Change Addition
TITLE			DELETE	6.1 TITLE	Change Addition

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:

| Activity 51-ZIP | 64 CITY-51-ZIP | 19.07(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.

5,2 NAME

6.3 STREET ADDRESS

NAME

STREET ADDRESS