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Jan 21 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 # V68031 (6) 1. Corporation Name J.D. PIRES GROUP, INC.		

Principal Place of Business 999 W. LANCASTER RD. ORLANDO FL 32809 US	Mailing Address PO BOX 951181 LAKE MARY FL 32795-1181 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2620 English Ivy Ct. Suite, Apt. #, etc.		2a. Mailing Address 26 Suite, Apt. #, etc.		3. Date Incorporated or Qualified 09/28/1992	
22 City & State 23 Longwood FL		27 City & State 28		4. FEI Number 59-3144475 Applied For Not Applicable	
24 Zip 32779 Country US		29 Zip 30		5. Certificate of Status Desired 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent PIRES, EDWARD F 999 W LANCASTER ROAD ORLANDO FL 32809				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code			
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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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D PIRES, EDWARD F STREET ADDRESS CITY - ST - ZIP	1.1 TITLE	*Address change only
NAME	PIRES, EDWARD F	1.2 NAME	
STREET ADDRESS	999 W LANCASTER RD	1.3 STREET ADDRESS	2620 English Ivy Ct.
CITY - ST - ZIP	ORLANDO FL	1.4 CITY - ST - ZIP	Longwood FL. 32779
TITLE	D PIRES, EMILY R STREET ADDRESS CITY - ST - ZIP	2.1 TITLE	*Address change only
NAME	PIRES, EMILY R	2.2 NAME	
STREET ADDRESS	999 W LANCASTER RD	2.3 STREET ADDRESS	2620 English Ivy Ct.
CITY - ST - ZIP	ORLANDO FL	2.4 CITY - ST - ZIP	Longwood FL. 32779
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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, or on an attachment with an address.

SIGNATURE: Ed Pires 1/21/98 4M-233-9057

CR2E034 (10/97)