

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

FILED

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

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M35245 (3)
1. Corporation Name
LENS EXPRESS, INC.



Principal Place of Business 350 S.W. 12TH AVE. DEERFIELD BEACH FL 33442	Mailing Address 350 S.W. 12TH AVE. DEERFIELD BEACH FL 33442
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DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business	26 2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified
07/16/1986

4. FEI Number **59-2716440**

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

9. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
528 EAST PARK AVE.
TALLAHASSEE FL 32301**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'NEILL	1.2 NAME	
STREET ADDRESS	2760 NE 52ND ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	LIGHTHOUSE PT. FL.	1.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AKDAG, MENDERES	2.2 NAME	
STREET ADDRESS	298 NE 6TH ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL.	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JEFFERY A. BERNFELD	3.2 NAME	
STREET ADDRESS	829 MIDDLESEX TURNPIKE	3.3 STREET ADDRESS	
CITY-ST-ZIP	BILLERICA MA	3.4 CITY-ST-ZIP	
TITLE	CEO <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D. VERNE SHARMA	4.2 NAME	Robert J. Palmisano
STREET ADDRESS	54 AMANDA RD.	4.3 STREET ADDRESS	21 Hickory Dr
CITY-ST-ZIP	SUDBURY MA	4.4 CITY-ST-ZIP	Waltham, MA 02154
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARD MILLER	5.2 NAME	
STREET ADDRESS	255 CLINTON RD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKLINE MA	5.4 CITY-ST-ZIP	
TITLE	T <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RAJIV BHATT	6.2 NAME	Richard M Traskas
STREET ADDRESS	80 PARK ST., PENTHOUSE	6.3 STREET ADDRESS	65 Bayberry Road
CITY-ST-ZIP	BROOKLINE MA	6.4 CITY-ST-ZIP	Glastonbury, CT 06033

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: _____ *01-20-97* *954-421-5800*

CR2E034 (10/97)