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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F96000006371 (6) DOCUMENT #

FILED Mar 11 1998 8:00am Secretary of State

LISA E	i, INC.					
Principal Pla	ce of Business	Mailing Address			I HORNING HILD COURT GOVERNMENT GOVERNMENT CONTROL OF COURT CONTROL OF COURT CONTROL OF COURT CO	E!!(00!! 0
1424 BLUE HERON ROAD		1424 BLUE HERON ROAD				
VIRGINIA BEACH VA 23454-1700 VIRGINIA BEACH VA 234			3454-1700	1700 DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	I INIS SPACE
					12/06/1996	
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		54-1713657	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing	
23		28				\$5.00 May Be Added to Fees
Z ip	Country	Zip	Cour	itry	8. This corporation owes or has paid	
24	25	29	30		Personal Property Tax due June 30	
_	Name and Address of Currer T CORPORATION SYSTEM	nt Registered Agent		81 Name	10. Name and Address of New Regis	itered Agent
	00 SOUTH PINE ISLAND ROAD		Ľ	1,6		
PLANTATION FL 33324				Street A	ddress (P.O. Box Number is Not Acceptable)	
	7417771011 1 2 00024		-	83		
			-	N4 00		
			ľ	64 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t				ove-named o	corporation submits this statement for the purporation's heard of directors. I bereby accept the	cose of changing its registered
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 age	(1)	OTE D			DATE
12.		D DIRECTORS	13.	Agent signature in	equired when reinstating) ADDITIONS/CHANGES TO OFFICER	
TITLE	PDS	DELETE	1.1 TIT	E	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	EPSTEIN, LISA A		1,2 NA	AE		
STREET ADDRESS	1424 BLUE HERON ROAD	***	1.3 STR	EET ADDRESS		
CITY-ST-ZIP	VIRGINIA BEACH VA 23454-1			r-ST-ZIP		
TITLE	TDV Epstein, Barry P	☐ DELET É	2.1 TiTi			☐ Change ☐ Addition
NAME STREET ADDRESS	1424 BLUE HERON ROAD		2.2 NAM	EET ADDRESS		
	VIRGINIA BEACH VA 23454-1	700		Y-ST-ZIP		
CITY-ST-ZIP TITLE		DELETÉ	2. 4 CH			Change Addition
NAME			3.2 NAM	lE .		
STREET ADDRESS			3.3 STR	EET ADDRESS		
CITY-ST-ZIP	<u> </u>		3.4. CIT	Y-ST-ZIP		
TITLE		☐ DELETE	4.1 TOL	E	•	☐ Change ☐ Addition
NAME			4. 2 NAI	ИE		
STREET ADDRESS	ĺ			EET ADDRESS		
TITLE		☐ DELET e	4.4 CITY 5.1 TITL	'-ST-ZIP		☐ Change ☐ Addition
NAME			5.1 HILL 5.2 NAM			C Change C Addition
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		DELETE	6.1 TITE			Change Addition
NAME			6.2 NAN	IE		
STREET ADDRESS			6.3 STR	ET ADDRESS		
CITY-ST-ZIP			6.4 CITY	-ST-ZIP		

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 tho receiver or trustee ampowered 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.