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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000017544 (4)

PRICE ASSOCIATES OF VIRGINIA CORP.

FILED Jan 28 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 200 S BISCAYNE BLVD SUITE 1000 PO BOX 15501 MIAMI FL 33131 ALEXANDRIA VA 23309 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/28/1995 2. Principal Place of Business 2a. Mailing Address Applied For 65-0556615 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MERADA, JUDY 108TH AVE NORTH Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 33701 83 85 Zip Code City FL 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 little if applicable (NOTE. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 11 TITLE PRICE, JOSEPHINE M 12 NAME NAME CR2E034 3250 PELICAN PL 1.3 STREET ADDRESS STREET ADDRESS ALEXANDRIA VA 22306 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Addition 2.1 TITLE Спалое TITLE NAME PRICE, BILLY J 2.2 NAME 3250 PELICAN PL 2.3 STREET ADDRESS STREET ADDRESS ALEXANDRIA VA 22306 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 32 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-SY-ZIP 3.4. CITY-ST-7/P DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST-ZIP CITY-ST-ZIP TITLE DELETE 5 1 TITLE Change Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

bes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information it is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an a empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in a address. 14. I hereby certify that the information indicated on this annual report or officer or director of the corporation Block 12 or Block 13 if changes, o

SIGNATURE:

MEQUIRED

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