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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M62451

(3)

CLASSIC	STONE, INC.	• •							
Principal Place of Business Mailing Address 10164 N.W. 47TH STREET 10164 N.W. 47TH STREET SUNRISE FL 33351-7966 SUNRISE FL 33351-7966						T LUCIDADI ING SAMO ANDII BIABY BANDI INGI DIGII BASA BANAI DIGII DABA QADII DIGI			
						3. Date incorporated or Qualified 11/13/1987		ate of Last f /29/1996	Report
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number			pplied For
21		26				65-0017474		N	lot Applicable
Suite, Apt. #, etc		Suite, Apt #, etc.			5. Certificate of Status Desired		+	Additional	
22 Ch. 8 Chata		City & State				6 Florida Compaign Florida			lequired
City & State	;	26				6. Election Campaign Financing Trust Fund Contribution	П		May Be to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation has liability for	intangible		
24	25	29	30			Florida Statutes	Yes	☐ No	
	9. Name and Address of Curr	ent Registered Agent		- 4 [10. Name and Address of New Re	ğistered	Agent	
	IN, RICHARD C., ESQ.			81	Name				
	W. OAKLAND PARK BLVD.			B2	Street Addre	ess (P.O. Box Number is Not Acceptat	ole)		
STE.			1	63					
5UN	RISE FL 33351								
				84	City		FL	_ 85 Zip	Code
SIGNATURE	in familiar with, and accept the ob- Signalare, typed or proted name of registered. OFFICERS A					ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AN	D DIRECTO	RS IN 12
TITLE	PD			1.1 TITLE		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		☐ Change	Addition
NAME	KREVOY, STEVE 8331 N.W. 74TH ST.		1.2 NA	ME					
STREET ADDRESS				1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE					
CITY-ST-7:P	TAMARAC FL							☐ Change	Addition
TITLE	STD Krevoy, Karen							onlinge	
NAME DESCRIPTION OF THE PROPERTY OF THE PROPER	8331 N.W. 74TH ST.		22 NA 23 ST		ADDRESS				
STREET ADDRESS CITY - ST - ZIP	TAMARAC FL			2 4 City-St-Zip					
TITLE		DELETE					,	Change	Addition
NAME			3.2 NA	ME					
STREET ADDRESS			3.3 ST	REET	ADDRESS				
CITY-ST-ZIP		L DELETE	3.4 CI		ST-ZIP			Change	Addition
THTLE) OELETE	4.1 TII 4. 2 N					Oninge	roomo
NAME.					ADDRESS				
STREET ADORESS CITY-ST-ZIP					ST-ZIP				
TITLE		DELETE						Change	Addition
HAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET	ADDRESS				
CITY-ST-ZIP					ST - ZIP			Change	Addition
TITLE		L) DELETE	1					CT CHAILBE	, L. Mudital
NAME			62 N/		AODOCO				
STREET ADDRESS					ADDRESS				
CiTY+S1+ZiP	hy certify that the information suor	hed with this filing does not	auglify for the	OVC	ST-ZIP emption state	d in Section 119.07(3)(i), Florida Statut	es. I furth	er certify th	at the
informatic I am an o appears i	on indicated on this annual report inflicer or director of the corporation in Block 12 or Block 13 if changed	or supplemental annual repo n or the receiver or trustee er l, or on an attachment with a	rt is true and a npowered to e n address.	exec	urate and tha cute this repo	t my signature shall have the same leg rt as required by Chapter 607, Florida	al effect Statutes;	as it made it and that my	under oath; th y name

LADGY KREVOY 1-14-97 954-572-8;
OFFICEN ON DIRECTOR

FILED

Jan 23 1997 8:00am

Secretary of State