

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# H06138

Entity Name: HIGH PERFORMANCE CLASSICS, INC.

**FILED**  
**Apr 15, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

931 S.R. 434  
#201  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

1541 STATE AVE  
HOLLY HILL, FL 32117

**Current Mailing Address:**

931 S.R. 434  
#201  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

FEI Number: 59-2531783      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AZAR, DOROTHY  
931 S.R. 434  
#201  
ALTAMONTE SPRINGS, FL 32714 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: AZAR, FRANK L  
Address: 931 S.R. 434 #201  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S ( ) Delete  
Name: AZAR, DOROTHY M  
Address: 931 S. R. 434, #201  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/V/P (X) Change ( ) Addition  
Name: AZAR, FRANK L  
Address: 931 S.R. 434 #201  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S/T (X) Change ( ) Addition  
Name: AZAR, DOROTHY M  
Address: 931 S. R. 434, #201  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOROTHY M. AZAR

S/T

04/15/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date