2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) H28108 **DOCUMENT #**

FILED
Mar 27, 2003 8:00 am
Secretary of State
03-27-2003 90086 015 ***150 00

KLASSIC COACH SERVICES, INC.						03-27-2003 90	080 01	13 ****13	0.00	
Principal Place of Business 7187 NO WATERWAY DRIVE MIAMI FL 33155 Mailing Address 7187 NO WATERWAY DRIVE MIAMI FL 33155							8 8 3 8			
2. Principal Place of Business Suite, Apt. #, etc. City & State			3. Mailing Address Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
			City & State			4. FEI Number 59-2471237		⊢ -	Applied For Not Applicable]
Zip Country		Zip	Cour	ntry	5. Certificate of Status Desired		\$8.75 A Fee Requi			
	6. Name	and Address of Current	Registered Agent		Name	7. Name and Address of New Reg	istered .	Agent	· · · · · · · · · · · · · · · · · · ·	45
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10422 SV		BERTO			Street Address	(P.O. Box Number is Not Acceptable)				1
MIAMI FL										1
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	e named entit		or the purpose of changing	its register	L ed office or registe	red agent, or both, in the State of Florid			n, and accept	1
tile obliga	mons or regisi	;								
SIGNATURE	Signature, typed	or printed name of registered agent	and title if applicable. (I	NOTE: Registere	ed Agent signature require	d when reinstating)	DATE			
Afte	er May 1, 200	II FEE IS \$150.00 03 Fee will be \$550.00 o Florida Department o	f State			9. Election Campaign Finan Trust Fund Contribution.	cing [00 May Be ed to Fees	
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10.				11.		ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTO	RS IN 11	7
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TITLE NAME - STREET ADDRESS	DE LA VIC 7187 N.W.	OFFICERS AND	DIRECTORS	TITLE NAM STRE	E IE EET ADDRESS	ADDITIONS/CHANGES TO OFFICE	RS AND			(40/00)
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachmen with an address, with all other like empowered.

SIGNATURE: