K93654

(Re	equestor's Name)	
/ (Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	TIAW	MAIL
, (Bu	ısiness Entity Nar	me)
(Do	ocument Number)	<u> </u>
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	





600027906516

02/02/04--01110--004 **35.00



Mracha

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Classic Yacht Refinishing, Inc. (Name of corporation)
DOCUMENT NUMBER: K93654
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Peter M. Commette, Esq. (Name of person)
Peter M. Commette, P.A. (Name of firm/company)
1323 SEThird Ave
Ft Lauderdale, FL 33316
(City/state and zip code)
For further information concerning this matter, please call:
Peter M. Commette, ESq. at (954) 764-0005, Ext. 43 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 6, 2004

PETER M. COMMETTE, P.A. % PETER M. COMMETTE, ESQ. 1323 SE 3RD AVE. FT. LAUDERDALE, FL 33316

SUBJECT: CLASSIC YACHT REFINISHING, INC.

Ref. Number: K93654

We have received your document for CLASSIC YACHT REFINISHING, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please complete document enclosed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Anna Chesnut Document Specialist

Letter Number: 004A00008383

04 FEB 27 - MM 9: 01

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.
1. The name of the corporation: Classic Vacht Refinishing, Inc.
2. The mailing address of the corporation: $271-273$ S.W. 33^{rd} Courting:
Fort Lauderdale, FL 3335 ==
3. Date of incorporation/qualification: $6/7/89$ Document number: $6/7/89$
4. The name and address of the current registered agent and registered office:
Ian MacDonald
1615 SW 15th Terrace
Fort Lauderdale, FL 33312
5. The name and address of the new registered agent (if changed) and /or registered office (if changed): (P.O. Box NOT Acceptable)
Peter M. Commette, Esq.
1323 S.E. Third Ave
Fort Lauderdale, FL 33316
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
dan la den eld
(Signature of an officer, chairman or vice chairman of the board) (Date)
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
2-25-04
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * **

P.O. Box 6327

TALLAHASSEE, FL 32314

CR2E045(9/00)

DIVISION OF CORPORATIONS