FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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ED NAME OF SIGNING OFFICER OR DIRECTOR

appears in Block 12 or Bluck 13 if change

SIGNATURE:

PROFIT CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT OF STATE Sandra B. Mortham Scoretary of State

DIVISION OF CORPORATIONS 1996 (6)**DOCUMENT #** L84895 Corporation Name CASA CLASSICA BUILDING INC. Mating Address Principal Place of Business 8360 WEST FLAGLER ST. 8360 WEST FLAGLER ST. STE. #200 STE. #200 MIAMI FL 33144 3a. Date of Last Report MIAMI FL 33144 3. Date Incorporated or Qualified 02/03/1995 07/03/1990 4. FEI Number Applied For 2a. Maling Address 2. Principal Place of Business Not Applicable 65-0203336 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite. Apt. #, etc 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s. 199.032 Country Zα Ζip Country Yes No Florida Statutes 29 30 25 24 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) 82 MODOLO, VITO 1581 BRICKELL AVE 83 #2102 Zio Code 85 MIAMI FL 33129 84 City 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Parise. Bug were t Agent signal increasured when reinstaling. Styriatine, typed or painted many of regulation beam facilitated apply and (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELFTE 1 1 TITLE TITLE CR2E034 1.2 NAME MODOLO, VITO NAMÉ 1.3 STREET ADDRESS 1581 BRICKELL AVE #2102 STREET ADDRESS 14 CHY-ST-ZIF MIAMI FL CITY-ST-ZIP Change ☐ Addit-on DELETE 2.11sttE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 24 CITY-ST-ZIF CHTY-ST-ZIP Change Addition DELETE 3 1 THILE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 City - ST - ZIP CITY - ST - ZIP Change ne:bbb 🔲 DELFIE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREEL ADDRESS 4.4 CITY - \$1 - 2IP CITY - ST - ZIP 2000018407**5**@ DELETE 5 1 TILLE TITLE -05/28/96--01032--016 5.2 NAME NAME ***400.00 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY ST-ZIP CITY - ST-7/P Altdition Change DELETE 6 171114 TITLE NAME 6.3 STREET ADDRESS 22 STREET ADDRESS 6.4 CITY - ST - ZIP supplicitly furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further lemental annual report is true and accurate and that my signature shall have the same legal effect as if made under liver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name with an address. City - ST - ZIP 14. I do hereby certify that the information supplied with this fiting is vertify that the information indicated on its annual report or support, that I am an officer or director of the purporation or the region.

04-30-1996 -305-5547229