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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L85801

(3)

CLASSIC HOUSE BUILDING, INC.

Principal Place of Business Mailing Address 8360 WEST FLAGLER ST. 8360 WEST FLAGLER ST. STE. #200 STE. #200 MIAMI FL 33144-2075 MIAMI FL 33144 3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1996 07/09/1990 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0368438 Not Applicable 26 21 Suite, Apt. #, etc \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing П Trust Fund Contribution Added to Fees 23 28 Country Zip Zin Country 8. This corporation has liability for intengible tax under s. 199.032 🗹 Yes 🔲 No Florida Statutes 24 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MODOLO, VITO 1581 BRICKELL AVE #2102 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33129** 83 84 City Zip Code 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or printed name of registered agent and title if approable (NOTE: Registered Agent signature required when reinstating) (96/6) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DΡ DELETE Change Addition 1.1 TITLE Hit MODOLO, VITO 1.2 NAME NAME 1581 BRICKELL AVE #2102 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33129** 1.4 CITY-ST-ZIP CHTY-ST-ZIF DELETE Change ☐ Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE THE 3.2 NAME NAM: 3.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST-ZIP of callify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the sort is true and accurate and that my signature shall have the same legal effect as if made under oath; that empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name an address. 14. I do hereby certify that the information supplied with this filing does not information indicated on this annual report or sopplemental annual re I am an officer or director of the corporation or the receiver or trustee appears in Block 12 or Block 13 if chang

3.4. CITY - ST - ZIP

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

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Apr 25 1997 8:00am

Secretary of State