

Division of Corporations Page 1 of 2
P010000100306

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)205-0380

From:
Account Name : Financial Accounting Services
Account Number : I20020000012
Phone : (407)423-2371
Fax Number : (407)423-7226

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 MAY -9 AM 10:52

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REGISTERED AGENT CHANGE

CLASSIC POINT, INC.

RECEIVED
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DIVISION OF CORPORATIONS

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CLASSIC POINT, INC.
(Name of corporation)

DOCUMENT NUMBER: P0100J10J306

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:

Azina Kanji

(Name of person)

Financial Accounting Services

(Name of firm/company)

730 W. Colonial Drive

(Address)

Orlando, Fl. 32804

(City/state and zip code)

For further information concerning this matter, please call:

Azina Kanji

(Name of person)

at (407) 423-2371

(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

CR2E045(07/02)

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 8, 2003

CLASSIC POINT, INC.
3800 US HWY 98 NORTH
LAKELAND, FL 33809

SUBJECT: CLASSIC POINT, INC.
REF: P01000100306

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

PLEASE LIST AN ADDRESS ON #6 FOR THE NEW REGISTERED AGENT.

The capacity of the person signing the document must be typed or printed beneath or opposite the signature.

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) 245-6906.

Darlene Connell
Document Specialist
Amount charged: 35.00

FAX Aud. #: H03000189828
Letter Number: 103A00028687

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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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, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Classic Point, Inc.
2. The principal office address: 3800 US Highway 98 North
Lakeland, Fl. 33809
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/15/2001 Document number: P01000100306
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Moinuddin Khan Meo
3800 US Highway 98 North
Lakeland, Fl. 33809
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Haseeb Khan
3800 US Highway 98 North
(P.O. Box or personal mailbox NOT acceptable)
Lakeland, Fl. 33809

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TALLAHASSEE, FLORIDA

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. Haseeb Khan corporation has been notified in writing of the change.

Haseeb Khan Officer
(Signature of an officer, chairman or vice chairman of the board)

Moinuddin Khan Meo
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby affirm that the corporation has been notified in writing of this change.

Haseeb Khan
HASEEB KHAN

5/1/2003

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314