

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000020163

Entity Name: CLASSIC DEVELOPERS, INC.

FILED  
Apr 25, 2008  
Secretary of State

## Current Principal Place of Business:

12305 S. DIXIE HWY  
MIAMI, FL 33156

## New Principal Place of Business:

## Current Mailing Address:

12305 S. DIXIE HWY  
MIAMI, FL 33156

## New Mailing Address:

FEI Number: 01-0619504

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GORMAN, LENARD H  
1320 SOUTH DIXIE HWY., PENTH. 1275  
CORAL GABLES, FL 33146 US

## Name and Address of New Registered Agent:

GORMAN, LENARD H  
9100 SOUTH DADELAND BLVD  
ONE DATRAN CENTER SUITE#1010  
MIAMI, FL 33156 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LENARD GORMAN

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FONTECILLA, ISABEL  
Address: 12305 S DIXIE HWY  
City-St-Zip: MIAMI, FL 33156

Title: VD ( ) Delete  
Name: FONTECILLA, CLAUDIA  
Address: 12305 S. DIXIE HWY  
City-St-Zip: MIAMI, FL 33156

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ISABEL FONTECILLA

PD

04/25/2008

Electronic Signature of Signing Officer or Director

Date