

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000041516

**FILED**  
**Oct 05, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA CLASSIC AUTOS, INC.

**Current Principal Place of Business:**

2100 C SOUTHWEST CONANT AVENUE  
PORT ST. LUCIE, FL 34953 US

**New Principal Place of Business:**

4350 N.W. 19TH AVE  
DEERFIELD BEACH, FL 33064 US

**Current Mailing Address:**

100 SOUTH POINTE DRIVE  
UNIT 905  
MIAMI BEACH, FL 33139 US

**New Mailing Address:**

**FEI Number:** 26-2633887      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHRISTOPHER, FRANCHEY  
100 SOUTH POINTE DRIVE  
UNIT 905  
MIAMI BEACH, FL 33139 US

**Name and Address of New Registered Agent:**

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:** CHRISTOPHER FRANCHEY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CHRISTOPHER, FRANCHEY  
**Address:** 100 SOUTH POINTE DRIVE  
**City-St-Zip:** MIAMI BEACH, FL 33139 US

I hereby 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 all other like empowered.

**SIGNATURE:** CHRISTOPHER FRANCHEY

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

10/05/2010

\_\_\_\_\_  
Date