SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000013364 (3)

CLASSIC CHESS AND GAMES, INC.

Principal Place of Business

Mailing Address

FILED Jul 16 1998 8:00am Secretary of State



2468 HARBOUR COVE DRIVE FT. PIERCE FL 34949		2468 HARBOUR COVE DRIVE FT. PIERCE FL 34949		DO NOT WRITE II 3. Date Incorporated or Qualified	DO NOT WRITE IN THIS SPACE	
				02/22/1993		
2. Principal P	lace of Business 1	2a. Mailing Address	01 1	4. FEI Number	Applied For	
21 S2 Main Street		26 52 hai	w Societ	65-0665403	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State Cet of town, N. J.		City & HOCK & A A A A A A A A A A A A A A A A A A		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
24 076	grades as non-marker as and a secondary of the Control of the Cont		Country MORR	8. This corporation owes or has paid to Personal Property Tax due June 30), Xiyes No	
-	9. Name and Address of Current	Registered Agent		10. Name and Address of New Regis	stered Agent	
	CZYK, KENNETH J		81 Name	Kenned I Tom	CAYK	
	HARBOUR COVE DRIVE		82 Street	Address (P.O. Box Number is Not Acceptable)		
FT. PIEROE FL 34949					A .	
				2506 Shady brouch	Hive	
			84 City	Delado	FI 85 Zip Code	
11. Pursuant to the provisions of sections 107.0502 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, inche Start, 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 objigations of section 607.0505, Florida Statutes.						
SIGNATURE						
	Signature, typed or printed name of registered agent	/ <i>- / /</i>		re required when reinstating)	DATE DIDECTOR ALL 40	
12. TITLE	PSD OFFICERS AND	/ ·	13.	ADDITIONS/CHANGES TO OFFICE	A-1	
NAME	TOMCZYK, KENNETH	[] DELETE	1.1 TITLE		Change L Addition	
	2468 HARBOUR COVE DRIVE		1.2 NAME 1.3 STREET ADDRESS	Sa Main Street		
STREET ADDRESS	FT. PIERCE FL 34949		1.3 STREET ADDRESS	Hockette Down, N.J.	07840	
CITY-ST-ZIP TITLE	D	DELETE	2.1 TITLE	HOLE TO ODWN 10. V.	Change Addition	
NAME	TOMCZYK, JOSEPH	f" liberate	2.2 NAME		C Cliange C Addition	
STREET ADDRESS	2506 SHADYBRANCH DRIVE		2.3 STREET ADDRESS	19 Indian RUN Rd.		
CITY-ST-ZIP	ORLANDO FL 32822		2.4 CITY-ST-ZIP	Long Volley, N.J. O	2863	
TITLE	D	DELETE	3.1 TITLE	8 000	Change	
NAME	TOMCZYK, JOHN	C Danz C	3.2 NAME		4210 Manago III Managan	
STREET ADDRESS	2468 HARBOUR COVE DRIVE		3.3 STREET ADDRESS	Sa Main Street		
CITY-ST-ZIP	FT. PIERCE FL 34949		3.4 CITY-ST-ZIP	Hacke outs town, N. J.	27840	
TITLE	D	DELETE	4.1 TITLE		Change Addition	
NAME	TOMZYK, WILLIAM		4.2 NAME	TORCZYK, William		
STREET ADDRESS	2468 HARBOUR COVE DRIVE		4.3 STREET ADDRESS	TOMCZYK, WILLIAM Sa Main Street	**	
CITY-ST-ZIP	FT. PIERCE FL 34949		4.4 CITY-ST-ZIP	Hocke of town, N.J. 07	890	
TITLE	D	DELETE	5.1 TITLE		Change Addition	
NAME	TOMCZYK, JOSEPH JR.		5.2 NAME	1	,	
STREET ADDRESS	2468 HARBOUR LOVE DR.		5.3 STREET ADDRESS	19 Indian Run Rd.	. /.	
CITY-ST-ZIP	FT. PIERCE FL		5.4 CITY-ST-ZIP	LONG Valley, N.J. O	7813	
TITLE	D TOURAND OFFICER	DELETE	6.1 TITLE		Change Addition	
NAME	TOMCAYK, GREGORY		6.2 NAME	Tome 24K, GREGORY	,	
STREET ADDRESS	2468 HARBOUR LOVE DRIVE		6.3 STREET ADDRESS	19 Indian low Rd	a./s	
CITY-ST-ZIP	FT. PIERCE FL	,	6.4 CITY-ST-ZIP	LONG Valley, N.7 076	888	
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Fletina Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 orturustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attackment with an address.						