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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Apr 14 1997 8:00am

Secretary of State

DOCUMENT # P93000070868 (3)

WORLD CLASSIC COACH BUILDERS, INC.

Principal Place of Business Mailing Address					T I NO ESTADO I STA TOTADO STITUL DO TRE CONSTA	FORM DENN NOON		
8885 N.W. 21S CORAL SPRING		8885 N.W. 21ST ST. CORAL SPRINGS FL 33071-6167						
		·			Date Incorporated or Qualifie 10/12/1993	i i	ate of Last F 01/1996	Report
	lace of Business	2a. Mailing Address			4. FEI Number		Aı	pplied For
21		26			65-0440903 Not Applic		ot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		I & Cemicale of Status Desired I I '		•	Additional
22		[27]					Fee Re	equired
City & State		City & State		6. Election Campaign Financing \$5.00 May Be				
Zip Country		28			Trust Fund Contribution			to Fees
24	25	Zip	<u></u> ⊢η ΄		8, This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
[24]	g. Name and Address of Curren	29 t Registered Agent	30		10. Name and Address of New			
ואית	LESSANDRO, SALVATORE		81	Name		Tiogisto. ou i	- igonic	
8885 N.W. 21 ST.				L				
	RAL SPRINGS FL 33071		82		lress (P.O. Box Number is Not Accep	otable)		
00.	PL OF THIS OF L COOFT		83					······································
			84	City		FI	85 Zip	Code
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change w	as authorized b	y the corpora	poration submits this statement for the tion's board of directors, i hereby ac	ie purpose of cept the app	changing if ointment as	ts registered registered
SIGNATURE								
	Signature, typed or printed name of registered ago		(NO1t : Registered Ag	ent signature requ		DATE		
12. TITLE	OFFICERS AND	DELETE	13. 11 IIIU		ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR Change	RS IN 12
NAME	CARNABUCI, SANTO A.							□) Mudition
STREET ADDRESS	8885 NORTHWEST 21ST STRE	ET	1.2 NAME	I IDDDCCC				
,	CORAL SPRINGS FL	·-·	1.3 STREE					
CITY-ST-ZIP TITLE	V	DELFTE	1.4 City - 5 2.1 Title	S1 - ZiP'			Change	Addition
NAME	D'ALESSANDRO, SALVATORE	E.J Dett te	2.2 NAME				[] Onengo	☐ VO(IIII)
STREET ADDRESS	8885 NORTHWEST 21ST STRE	FT	2.2 NANIC 2.3 STREET	LADDOLCO				
CITY-ST-ZIP	CORAL SPRINGS FL	·= ·	2.4 CITY -					
TITLE		DECETE	3.1 TILE	31-21			Change	Addition
NAME			3.2 NAME				em onongo	
STREET ADORESS			3.3 STREET	Ahnness				
CITY-ST-ZIP			3.4. CHY-	i				
TITLE		DELFTE	4.1 1111.6				Change	Addition
NAME			4. 2 NAME				_ `	_
STREET ADDRESS				ADDRESS				
CITY-ST-ZIP			4.4 CITY - S					
TITLE		DELFTE	5.1 TITLE			······································	Change	Addition
NAME			5.2 NAME	į	•			
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CHY- S	ST - ZIP				
TITLE		DELETE	611111	<u> </u>			Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			63 STREET	ADDRESS				

64 GIY-SI-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida 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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver of fig. 100 in an address.

1 In the composition of the corporation or the receiver of fig. 100 in an address.

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OLOMATUDE: