FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000024922 (4)

CLASSIC HEAVEN, INC.

FILED Jan 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										
5211 SOUTH WASHIN	5211 SOUTH WASHINGTON AVENUE									
TITUSVILLE FL 32780		TITUSVILLE FL 32780					DO NOT WOITE IN THIS	00405		
						DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualified			
2. Principal Place of	Pueinees	6- Maile	a Addross				03/28/1994 4. FEI Number	1 14.		
· `	2a. Mailing Address						/	oplied For		
Suite, Apt. #, etc.	Suite, Apt. #, etc.					59-3232592		ot Applicable Additional		
22	├ 1	27				5. Certificate of Status Desired	·	Additional equired		
City & State	City & State					6. Election Campaign Financing		May Be		
23	28					Trust Fund Contribution		to Fees		
Zip	Country	Zip		Cou	intry		8. This corporation owes or has paid the cu			
24	25	29		30	·] No	
	Name and Address of Current		Agent		[10. Name and Address of New Registered	Agent		
WELK, DONALD F						Name			1	
5211 SOUTH WASHINGTON AVENUE					82	Stroot A	ddress (P.O. Box Number is Not Acceptable)			
TITUSVILLE FL 32780					02	Sueel At	(Bidatasa i .O. Dox Munibar is Not Acceptable)			
***************************************					83					
					0.4	0::		7007		
					84	City	FL	85 Zip	Code	
11. Pursuant to the p	provisions of Sections 607 0502	and 607.150	8, Florida Statute	s, the a	bove	-named c	corporation submits this statement for the purpose of	f changing i	ts registered	
office or registered agent, or both, in the State 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 obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE Signature, typed or printed name of registered agent and trilloid applicable (NOTE: Registered Agent signature required when reinstating) DATE										
12.	OFFICERS AND	DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AN	DIRECTOR		
TITLE	<u> </u>		☐ DELETE	1.1 71	TLE		CEO	☐ Change	Addition	
	lk, donald f			1.2 N	AME		ROMAN THOCHOUSKY	•		
STREET ADDRESS 5211 SOUTH WASHINGTON AVENUE				1.3 S	THE CHIECET I WOLLEGE		SELL S. WASHIMGTON AVE)		
CITY-ST-ZIP	USVILLE FL 32780			1.4 CI	TY - S1	- ZIP	TITUSUILLE FL 32780		.]	
TITLE ST			DELETE	2.1 TI	TLE			☐ Change	Addition	
NAME RY	an, beverly			2.2 N	AME					
STREET ADDRESS 521	YENUE		2.3 S1	TREE1.	ADDRESS					
CITY-ST-ZIP	usville fl			2.40	ITY-S	T-ZIP				
TITLE C			DELETE	3.1 TI	TLE			☐ Change	Addition	
	rch, glenn e.			3.2 N	AME					
	1 S. WASHINGTON AVE.			3.3 S	TREET.	ADDRESS				
CITY-ST-ZIP	USVILLE FL			3.4. C	ITY-S	T-ZIP				
TITLE			DEL.ETE	4.1 10	TLE			Change	Addition	
NAME				4.2 N	AME					
STREET ADDRESS				4.3 S	REET.	ADDRESS				
CITY-ST-ZIP				4.4 CI	ITY - \$1	- ZIP				
TITLE			DELETE	5.1 31	1LE			Change	Addition	
NAME				5.2 N	AME					
STREET ADDRESS				5.3 ST	IREET.	ADDRESS				
CITY-ST-ZIP				5.4 CI	IIY-\$1	- ZIP				
TITLE			DELETE	6.1 TI				Change	Addition	
NAMÉ				6.2 N	AME					
STREET ADDRESS	• '			6.3 S1	TREET.	ADDRESS				
CITY-ST-ZIP					ITY - S1	ŀ				
				5., 6			o			

I 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 informatio 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 or trustee 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 attachment with an address.