Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90050 018 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000024922

7. Corporation	i wame				
CLASSIC	HEAVEN, INC.				
				1881/04 118 1861 4681) 4861 4861 4861 4861 4861	
]					
Principal Flace	e of Business	Mailing Address			i tract di gio inita (tare trac (pa)
5211 SOUTH WASHINGTON AVENUE 5211 SOUTH WASHINGTON I		ON AVENUE			
TITUSVILLE FL 32780 TITUSVILLE FL 32780					
				DO NOT WRITE IN THIS	S SPACE
				Date Incorporated or Qualifed	
				03/28/1994	
2. Principal Pi	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3232592	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	_	5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	9	City & State		6. Electic n Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	
24	25	29	30	Personal Property Tax.	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	Agent
				Roman Inochovsky	
WELK, DONALD F			J I		
5211 SOUTH WASHINGTON AVENUE			July Street A	5211 S. Washington Ave	
TITUSVILLE FL 32780			83		
			84 City	Titusville FL	_ 85 Zip Code 0
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida State	tes, the above-named co	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appointment of the purpose of the purpos	f changing its registered
office or re	egistered <i>a</i> ge <i>r</i> it, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was at ons of, Section 607.0505, Fl	authorized by the corpor orida Statutes.	ation's board of directors. Thereby accept the appli-	
$A/I/$ Kompa T_{i} at			ochovsky	4-76-9	9
SIGNATURE	Signalura typed or printed name of registered ag		E: Registered Agent signature red		
12.	OFFICERS A	NI) DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	Ø DELETE	1.1 TITLE		Change Addition
NAME	WELK, DONALD F		12 NAME		
STREET ADDRESS	5211 SOUTH WASHINGTON	avenue	1.3 STREET ADDRESS		
CITY-ST-ZIP	TITUSVILLE FL 32780		1,4 CITY-ST-ZIP		
TITLE	ST	⊠ DELETE	2.1 TITLE	ST	☐ Change 🐴 Addition
NAME	RYAN, BEVERLY		2.2 NAME	Porter, Virginia	
STREET ADDRESS	5211 SOUTH WASHINGTON	AVENUE	2.3 STREET ADDRESS	5211 S. Washington Ave Titusville, FL 32780	
CITY-ST-ZIP	TITUSVILLE FL		2.4 CITY-ST-ZIP	Titusville, FL 32780	
TITLE	C	☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME	PATCH, GLENN E.		3.2 NAME		
,	5211 S. WASHINGTON AVE.		3.3 STREET ADDRESS		
STREET ADDRESS	TITUSVILLE FL		3.4. CITY-ST-ZiP		
CITY-ST-ZIP	CEO	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
TITLE		_; been	4.1 IIILE 4.2 NAME		
NAME	INOCHOVSKY, ROMAN				Į
STREET ADDRESS	5211 S. Washington Ave.		4.3 STREET ADDRESS		

64 CITY-ST-ZIP CITY-ST-ZIP 14. 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 information indicated on this annual report or supplier estal annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that them an officer or director of the corporation or the receiver or trustee empowered to execute this report as recuired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, and attachment with an address, with all other like empowered.

5 3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITUSVILLE FL 32780

AND TYPED OR FRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

☐ DELETE

☐ Change

☐ Change

☐ Addition

☐ Addition