

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
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95 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Matheson Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000028120 (1)

1. Corporation Name

CLASSIC AND EXCLUSIVE CORP.

Principal Place of Business 932 S.W. 136 PLACE MIAMI FL 33175	Mailing Address 932 S.W. 136 PLACE MIAMI FL 33175
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/29/1994	3a. Date of Last Report
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2. Principal Place of Business 21 11807 S.W. 97 Street Suite, Apt. #, etc.	2a. Mailing Address 26 11807 SW 97 St Suite, Apt. #, etc.	4. FEI Number 65-0493521	Applied For Not Applicable
22 City & State MIAMI, FL	27 City & State MIAMI, FL	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 33186	25 USA	28 33186	29 USA
23 MIAMI, FL	28 MIAMI, FL	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24 33186	25 USA	29 33186	30 USA

9. Name and Address of Current Registered Agent JERVIS, TERESITA 2031 SW 134TH AVENUE MIAMI FL 33175	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 9706 SW 138 Ave. 83 84 City MIAMI FL 85 Zip Code 33186
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11. Pursuant to the provisions of Sections 607.0502 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, 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 _____ DATE _____
Signature typed or printed name of registered agent and the corporation (if/when required) and the corporation (if/when required)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE President & Treasurer	1.1 TITLE President & Treasurer ☒ Change ☐ Addition	NAME JOSEFINA A. GARCIA	
STREET ADDRESS	1.2 NAME	STREET ADDRESS 11807 SW 97 Street	
CITY, ST, ZIP	1.3 STREET ADDRESS	1.4 CITY, ST, ZIP MIAMI, FL 33186	
TITLE	2.1 TITLE Vice President of Marketing ☒ Change ☐ Addition	NAME Teresita Jervis	
STREET ADDRESS	2.2 NAME	STREET ADDRESS 9706 SW 138 Ave	
CITY, ST, ZIP	2.3 STREET ADDRESS	2.4 CITY, ST, ZIP MIAMI, FL 33186	
TITLE	3.1 TITLE Vice President of Artistic Director ☒ Change ☐ Addition	NAME Coladys Blanco	
STREET ADDRESS	3.2 NAME	STREET ADDRESS 932 SW 136 PLACE	
CITY, ST, ZIP	3.3 STREET ADDRESS	3.4 CITY, ST, ZIP MIAMI, FL 33184	
TITLE	4.1 TITLE	4.2 NAME	
STREET ADDRESS	4.3 STREET ADDRESS	4.4 CITY, ST, ZIP	
CITY, ST, ZIP	5.1 TITLE	5.2 NAME	
TITLE	5.3 STREET ADDRESS	5.4 CITY, ST, ZIP	
STREET ADDRESS	6.1 TITLE	6.2 NAME	
CITY, ST, ZIP	6.3 STREET ADDRESS	6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or biennial 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 treasurer 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 of a change, or on an attachment with an address.

SIGNATURE:  **JOSEFINA GARCIA** 4/11/95 305-284-2425
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR