

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

APPROVED AND FILED

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Secretary of State
Division of Corporations

19954 2895

B-4800

95 APR 28 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000057382 (1)

MINIERI CLASSIC HOMES, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: 29656 U.S. HIGHWAY 19 NORTH SUITE 100 CLEARWATER FL 34621
Mailing Address: 6419 MILLSTONE DRIVE NEW PORT RICHEY FL 34655

3. Date Incorporated or Qualified: 08/03/1994
3a. Date of Last Report
4. FEI Number: 59-3258233
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 State Apt #, etc: 22 City & State: 23 Zip: 24
2a. Mailing Address: 26 State Apt #, etc: 27 City & State: 28 Zip: 29
25 County: 30 County

9. Name and Address of Current Registered Agent
LAW FIRM OF LAWRENCE J. SPIEGEL CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
81 Name: CARL N. MINIERI
82 Street Address (P.O. Box Number is Not Acceptable): 29656 U.S. HWY 19 N. - SUITE 100
83
84 City: CLEARWATER FL 85 Zip Code: 34621

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: *Carl N. Minieri* CARL N. MINIERI PRESIDENT 4-12-95

12. OFFICERS AND DIRECTORS

11.1 NAME	MINIERI, CARL N
11.2 STREET ADDRESS	29656 U.S. HIGHWAY 19 NORTH, SUITE 100
11.3 CITY, ST, ZIP	CLEARWATER FL 34621
11.4 NAME	
11.5 STREET ADDRESS	
11.6 CITY, ST, ZIP	
11.7 NAME	
11.8 STREET ADDRESS	
11.9 CITY, ST, ZIP	
11.10 NAME	
11.11 STREET ADDRESS	
11.12 CITY, ST, ZIP	

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.2 STREET ADDRESS		
12.3 CITY, ST, ZIP		
12.4 NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.5 STREET ADDRESS		
12.6 CITY, ST, ZIP		
12.7 NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.8 STREET ADDRESS		
12.9 CITY, ST, ZIP		
12.10 NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.11 STREET ADDRESS		
12.12 CITY, ST, ZIP		

14. I hereby certify that the information supplied with this filing, voluntarily furnished and does not qualify for the exemption stated in Sections 199.032, 199.034, Florida Statutes. I further certify that the above-named individual on this annual report or supplementary 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 liquidator empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 11 or Block 13 of this filing, or as an attachment with an address.

SIGNATURE: *Carl N. Minieri* PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-95 (813) 787-3111