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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P95000046239 (6)

CLASSIC MANAGEMENT GROUP, INC.

Principal Place of Business

Mailing Address

FILED Apr 30 1998 8:00am Secretary of State



3210 N. HO Key West	DOSEVELT BLVD. El 99040	3210 N. ROOSEVELT BI KEY WEST FL 33040	LVD.					
NET WEST	rr 4000	WELL MEDI LE 20040			DO NOT WRITE	IN THIS SPACE		
					3. Date Incorporated or Qualified			
					06/14/1995			
	lace of Business	2a, Mailing Address			4. FEI Number	Applied For		
21 929	B Truman Auc		mus Av	ي	65-0589321	Not Applicab		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	6	City & State			6. Election Campaign Financing	\$5.00 May Be		
23 Kev	wast th	28 Key Wast	FL		Trust Fund Contribution	Added to Fees		
Zip /	Zip / Country Zip /		Country		8. This corporation owes or has pai	<u></u>		
24 🕠	25 WSA		كىل 30	<u>A</u>	Personal Property Tax due June			
	g. Name and Address of Current	Registered Agent		T	10. Name and Address of New Re	Jistered Ağent		
RODRIGUEZ, TAMMY					81 Name			
3708 DUCK AVENUE			82	82 Street Address (P.O. Box Number is Not Acceptable)				
K	KEY WEST FL 33040		83					
			84	City		FL 85 Zip Code		
l office or r	to the provisions of Sections 607 0502 egistered agent, or both, in the State of mamiliar with, and accept the obligations.	of Florida. Such change was a	uthorized b	v the cori	I corporation submits this statement for the p poration's board of directors. I hereby accep	urpose of changing its registered the appointment as registered		
SIGNATURE								
SIGNATORE	Signature, typed or printed name of registered agen	t and the diapplicable (NOTE	Registered Ag	eni signature	e required when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	D	☐ DELET E	1.1 TITLE			Change LI Addition		
NAME	RODRIGUEZ, TAMMY		1.2 NAME		46.00			
STREET ADDRESS	1001 TRUMAN AVE.		1.3 STREE	T ADDRESS	3708 DUCK AVE			
CITY-ST-ZIP	KEY WEST FL 33040		1.4 CITY-	ST-ZIP	J708 Duck Ave Keywast FL J3040 J708 Duck Ave Keywast FL W040			
TITLE	D	☐ DELETE	2.1 TITLE			Change Addition		
NAME	RODRIGUEZ, JOSE		2.2 NAME		TO ME ALO.			
STREET ADDRESS	1001 TRUMAN AVE.			TADDRESS	JAS CHEN THE			
CITY-ST-ZIP	KEY WEST FL 33040	Drive	2. 4 CITY-	ST-ZIP	Reymost PL WOYD	Change Addition		
TITLE		☐ DELET E	3.1 TITLE		,			
NAME			3.2 NAME					
STREET ADDRESS				i address				
CITY-ST-ZIP		☐ DELET E	3.4. CITY -	ST-ZIP		Change Addition		
TITLE		☐ DELETE	4.1 TITLE			Change L Addition		
NAME			4. 2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		POLITE	4.4 CITY-	ST - ZIP		Change Addition		
TITLE		∐ DELETÉ	5.1 THILE			Change Abbite		
NAME			5.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-SY-ZIP		DECETE	5.4 CITY -	ST - ZIP		Change Addition		
TITLE		☐ DELETE	6.1 TITLE			LI Ghange LI Addition		
NAME			6.2 NAME					
STREET ADDRESS			1	1 ADDRESS				
CITY-ST-ZIP			6.4 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 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 appearance with an address.