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

FILED Apr 03 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P95000058043 (7) TROMPE L'OEIL CLASSIQUE, INC. Principal Place of Business Mailing Address 2415 SOUTH THIRD STREET 2415 SOUTH THIRD STREET JACKSONVILLE BEACH FL 32250 JACKSONVILLE BEACH FL 32250 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/27/1995 2. Principal Place of Business 28. Mailing Address 4. FEI Number Applied For 59-3326794 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name JANKOWSKI, MARY L 2415 SOUTH THIRD STREET 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE BEACH FL 32250 83 84 City 85 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE JANKOWSKI, MARY L CR2E034 NAME 1.2 NAME 2415 SOUTH THIRD STREET STE 2415 STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE BEACH FL 32250 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE RAMIREZ, SHERI 2.2 NAME NAME 2415 SOUTH THIRD STREET STE 2415 STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE BEACH FL 32250 CITY-ST-ZIP 2 4 DITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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 roceiver 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.

SIGNATURE:

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