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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000037456 (6)

FILED Feb 06 1998 8:00am Secretary of State

CLASSIC ALTERATIONS & DRESSMAKING, INC.										
						4 14 B (14 B)				
Principal Place of Business Mailing Address								10011 01001 011	116 8111 1881	
411 S. PINEAPPLE AVE. 411 S. PINEAPPLE AVE.					-					
SARASOTA FL 34236 SARASOTA FL 34236					-	DO NOT WE	RITE IN THIS S	SPACE		
					3. D	ate Incorporated or Qualifie				7
					0)4/25/1996				-
2. Principal Pl	ace of Business	2a. Mailing Address				El Number		Ar	pplied For	1
21		26				59-2846734		No	ot Applicable)
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				ertificate of Status Desired			Additional	7
22		27							equired	4
City & State	9	City & State			1	ection Campaign Financing	³ ¬		May Be	
Zip	Country	28 Zin	Zip Country			ust Fund Contribution			to Fees	-
24	25	29	30	uy		nis corporation owes or has ersonal Property Tax due Ju	_	_	tangible ☑ No	
57;	9. Name and Address of Curren	1	130			ame and Address of New				┨
ં લાલ	LIOTTI, ROSALIE			1 Nam				- 		1
411 S. PINEAPPLE AVE.				Street Address (P.O. Box Number is Not			atabla)			4
	RASOTA FL 34236		8			t Address (P.O. Box Number is Not Acceptable)				
				13				~		7
				4 City		 		les l Zin	Cada	4
				City			FL	85 Zip (Code	
11. Pursuant t	o the provisions of Sections 607.0502	2 and 607.1508, Florida Statut	es, the abo	ve-name	ed corporation s	ubmits this statement for the	e purpose of	changing it	s registered	٦
agent. l	o the provisions of Se ctions 607.0502 egistered agent, or both, in the State n familiar with , and a ccept the oblige	ations of, Section 607.0505, Flo	orida Statu	by me o les.	orporation's boa	rd or directors. Thereby ac	сершие арро	as Inemianical	registered	
SIGNATURE	hosale Tist	oth					1-	29-9	9 P	
	Signature, typed or printed name of egisters ager OFFICERS AND			gent signat	ture required when rein	·				- <u>[</u>
12.	DEFICERS AND	DELETE	13.		ADI	DITIONS/CHANGES TO OF		Change	Addition	- 2
NAME	GIGLIOTTI, ROSALIE	1.2 N						C J orango	Addition	1
STREET ADDRESS	1003 MONTEZUMA DR.		1.3 STRE							8
CITY-ST-ZIP	BRADENTON FL 34209			-ST-ZIP	~					
TITLE	D	☐ DELETE	2.1 TITL				· · · · · · · · · · · · · · · · · · ·	Change	Addition	2
NAME	VIRGILIO, TEODORA		2.2 NAM	E				-		
STREET ADDRESS	914-A 66TH AVE., W		2.3 STRE	ET ADDRES	s					ļ
CITY-ST-ZIP	BRADENTON FL 34207		2.4 CIT	-ST-ZIP	ł					
TITLE		DELETE	3 1 TITL					Change	Addition	1
NAME			3.2 NAM	ŧ.						
STREET ADDRESS			3.3 STR	et addres	s					
CITY-ST-ZIP				-ST-ZIP		 				
TITLE		DELETE	4.1 TiTL				l	Change	Addition	
NAME			4. 2 NAS							
STREET ADDRESS				ET ADDRES	s		1			
CITY-ST-ZIP		DELETE	_	- \$1 - ZIP			//	Change	Addition	4
TITLE NAME		ביי טנננונ	5.1 TITLE 5.2 NAM					Olignige		
STREET ADDRESS							14 -	1/1_		
CITY-ST-ZIP			5.4 CITY	ET ADDRESS - St. 719	1	••• ·	γ_{f} / ∞	10		
TITLE		☐ DELETE	6.1 THILE					Change	Addition	-
NAME			6.2 NAM			9000024; -02/06/98010	araint			
STREET ADORESS				- et address	s	UZ/UB/38UI -***150.00	uoar-Ul	J		
CITY-ST-ZIP			6.4 CITY		·	亦亦作[[[]]]。[[][[]				1
	artify that the information supplied wil	th this filing does not qualify fo			alari in Saction 1	19 07/3Vi) Florida Statutos	Liuribor oor	tifu that the	information	┪

4. 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 attachment with an address.

CIONATURE: Xo.