## FILE NOW: FILING FEE AFTER MAY 1 IS \$55600

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morta

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000079428 (4)

CLASSIC CONCLUSIONS SOUTH INCORPORATED

Principal Place of Business Mailing Address 17801 FIELDBROOK CIRCLE, WEST 17801 FIELDBROOK CIRCLE, WEST **BOCA RATON FL 33496-1528 BOCA RATON FL 33496** 3. Date Incorporated or Qualified 3a. Date of Last Report 09/23/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 1021 65-0 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 \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Ζφ Country Zip Country This corporation has liability for intengible tax upder s. 199.032, Yes 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ZEITCHICK, CAROL 17801 FIELDBROOK CIRCLE, WEST Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33496** R3 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typicd or printed name of registered agent and title diappticable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE Pres 1.1 TITLE NAME 1.2 NAME Long 17801 1.3 STREET ADDRESS STREET ADDRESS 3496 14 CITY-ST-ZIP CITY - ST - ZIP Addition DELETE Change TITLE 21 TITLE NAME 2.2 NAME

2.3 STREET ADDRESS

3.3 STREET ADDRESS 3.4. City - ST - ZIP

4.3 STREET ADDRESS 4.4 City-St-Zip

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

5.4 CITY - ST - ZIP

2. 4 CITY - ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 ₹ITLE 6.2 NAME

DELETE

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14. If do 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 suppliemental 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 chapged, or on an attagrment with an address.

SIGNATURE:

STREET ADDRESS

STREET ADORESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE NAME

TITLE

NAME

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

CAYOL Zeitchick 1/22/97 5619458

**FILED** 

Jan 28 1997 8:00am

Secretary of State

R2E034 (9/96)

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