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FILED
May 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000021887 (9)

1. Corporation Name

CLASSIC MAINTENANCE SERVICE, CORP.



Principal Place of Business

19852 NW 88TH AVE.
MIAMI FL 33018

Mailing Address

19852 NW 88TH AVE.
MIAMI FL 33018

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/11/1997

4. FEI Number

65-0745490

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 16363 N.W. 16 St.

Suite, Apt. #, etc.

22 City & State

23 PEBROKE PINES, FL

24 Zip

33028

Country

25 U.S.A.

2a. Mailing Address

26 P.O. Box 171524

Suite, Apt. #, etc.

27 City & State

28 MIAMI, FL

29 Zip

33017

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

RODRIGUEZ, JOSE A
19852 NW 88TH AVE.
MIAMI FL 33018

10. Name and Address of New Registered Agent

81 Name RODRIGUEZ, JOSE A.
82 Street Address (P.O. Box Number is Not Acceptable)
16363 N.W. 16 St.
83
84 City PEBROKE PINES FL 85 Zip Code 33028

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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DT
NAME RODRIGUEZ, JOSE A
STREET ADDRESS 19852 NW 88TH AVE.
CITY-ST-ZIP MIAMI FL 33018 ☐ DELETE

TITLE P
NAME GONZALEZ, LUCIA
STREET ADDRESS 19852 NW 88TH AVE.
CITY-ST-ZIP MIAMI FL 33018 ☐ DELETE

TITLE S
NAME LOPEZ, AGUSTIN
STREET ADDRESS 19852 NW 88TH AVE.
CITY-ST-ZIP MIAMI FL 33018 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DT
1.2 NAME RODRIGUEZ, JOSE A. ☒ Change ☐ Addition
1.3 STREET ADDRESS 16363 N.W. 16 St.
1.4 CITY-ST-ZIP PEBROKE PINES, FL. 33028

2.1 TITLE P ☒ Change ☐ Addition
2.2 NAME GONZALEZ, LUCIA
2.3 STREET ADDRESS 16363 N.W. 16 St.
2.4 CITY-ST-ZIP PEBROKE PINES, FL. 33028

3.1 TITLE S ☒ Change ☐ Addition
3.2 NAME LOPEZ, Agustin
3.3 STREET ADDRESS 16363 N.W. 16 St.
3.4 CITY-ST-ZIP PEBROKE PINES, FL. 33028

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 attachment with an address.

SIGNATURE: JOSE A. RODRIGUEZ 04/24/98 954-430-8335

CR2E034 (10/97)