SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998, AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

IVISION OF CORPORATIONS

FILED Jul 29 1998 8:00am Secretary of State

	1998	DIVISION OF CORPORATIONS				
1. Corporatio		0053315 (2)				
A-CLASS	S DRIVING SCHOOL INC.				4 16 2 to 6 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	f Burns 1/160 tress (160) acts 1001
Principal Place of Business Mailing Address					{ I DOGREGOL HAD TORRE ROUNT BORING DORRE DOLLAR	1 41140 11100 11101 51401 3 111 1 14 1
826 NORTH JOHN STREET		826 NORTH JOHN STREET		·		
SUITE 205		SUITE 205		DO NOT WRITE IN THIS SPACE		
ORLANDO FL 32808		ORLANDO FL 32808		3. Date Incorporated or Qualified		
					06/16/1997	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-3453459	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		27 City & State			Fee Required	
23		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country Zip		Country		8. This corporation owes or has paid the cu	
24	25		30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent		0.4	10. Name and Address of New Registered	Agent
	IABIR, NESHAN D			81 Name		
826 NÓRTH JOHN STREET SUITE 2 05				82 Street Addr	dress (P.O. Box Number Is Not Acceptable)	
	ANDO FL 32808		83			
OND	- 1 L 02000)			
			1	84 City	Fi	85 Zip Code
11. Pursuant	to the provisions of sections 607.05	02 and 607.1508, Florida Statutes	s, the abo	ve-named corpo	ration submits this statement for the purpose of c	hanging its registered
agent. I	registered agent, or both, in the Statement familiar with, and accept the obli	gations of, section 607.0505, Flo	rida Stati	i by the corporatii utes.	on's board of directors. I hereby accept the appo	ointment as registered
SIGNATURE						
12.	Signature, typed or printed name of registered as OFFICERS A	ent and title if applicable (NO ND DIRECTORS	TE: Register	ed Agent signature requ	ulred when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PO	DELETE	1.1 TIT	LE		Change Addition
NAME	MAHABIR, NESHAN D		1.2 NA	ME		
STREET ADDRESS	1431 SACKETT CIRCLE		1.3 STREET ADDRESS			1
CITY-ST-ZIP	ORLANDO FL 32818		_	Y-ST-ZIP		
TITLE	STD	DELETE 2.1 T				Change Addition
NAME DEDEST ADDRESS	MAHABIR, ANAWATTIE 1431 SACKETT CIRCLE		2 2 NA			
STREET ADDRESS CITY-ST-ZIP	ORLANDO FL 32818			Y-ST-ZIP		
TITLE	OIL WIDO I E OZOTO	DELETE	3.1 TIT			Change Addition
NAME			3.2 NA			C 2000 C T VOODO()
STREET ADDRESS			3.3 STF	REET ADDRESS		
CITY-ST-ZIP			3.4 CIT	Y-ST-ZIP		
TITLE		DELETE	4.1 TIT	LE		Change Addition
NAME			4.2 NA			ļ
STREET ADDRESS			- 1	REET ADDRESS		
CITY-ST-ZIP TITLE		T DELETE	4.4 CIT	Y-ST-ZIP		
NAME	" 	L DELETE	5.2 NA	j		Change Addition
STREET ADDRESS	•			REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		DELETE	6.1 TIT			Change Addition
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 STR	REET ADDRESS		
CITY-ST-ZIP	will shall the interest of the state of the	the thin filing dos t HE - E H		Y-ST-ZIP	tion 440 07/200) Elected - 04-14-14-14-14-14-14-14-14-14-14-14-14-14	sh në dh n Ind-
indicated o	siury triat the information Supplied Wil on this annual report or supplements	in this tring does not quality for the	e exempl	uon siated in Sect	tion 119.07(3)(i), Florida Statutes. I further certify	inat the information

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 13 if changed, or on an attachment with an address.

SIGNATURE:

Marchest OURS D

1/21/98

407-247-1489