May 07, 1999 8:00 am Secretary of State

05-07-1999 90081 032 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000074345

CLASSIC & MUSCLE CAR SUPERSTORES, INC.

Principal Place	e of Business	Mailing Address			I LOUISON 316 10011 0011 00111 00111 00111	BOUNTOOL GIBOO HIN	11091 DIN 1001
5		4060 SNOWY EGRET DRIVE					
MELBOURNE FL 32901		WEST MELBOURNE FL 32904					
us		US	U\$		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
					08/26/1997		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Apı	plied For
21		26			59-3464850	Not	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A	
22		27		5. Certificate of States Bosiled	Fee Re	quired	
City & State		City & State		6. Election Campaign Financing	\$5.00	· · · · · · · · · · · · · · · · · · ·	
23		28		Trust Fund Contribution	Added to	o Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year	ar Intangible ☐ Yes	√ No
24	9. Name and Address of Curren		0		Personal Property Tax. 10. Name and Address of New Register		
	3. Name and Address of Curren	t Registered Agent	81	Name	70. Italia ana ricares arriversis		
HAG	AN, RICHARD A				 		
4060 SUNNY EGRET DRIVE		82	Street Ad	Idress (P.O. Box Number is Not Acceptable) SNOWY EGRET DRUE			
WEST MELBOURNE FL 32904			83	-7060	STOOK COKE, OLGO		
						T 1	
			84	City	!	FL 85 Zip C	ode
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the above	e-named co	rporation submits this statement for the purpos	se of changing its	registered
office or re	egistered agent, or both, in the State in familiar with, and accept the obligation	of Florida, Such change was auti	horized by	the corpora	ation's board of directors. I hereby accept the a	ppointment as reg	jisterea
					4_	ESC	
SIGNATURE	Signature, typed or printed name of egistered agen	nt and title if applicable (NOTE: R	egistered Agen	t signature requ	uired when reinstating) DAT	<u>y</u>	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	Р	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	HAGAN, RICHARD A		12 NAME		* 0		
STREET ADDRESS	4060 SUNNY EGRET DRIVE		1.3 STREET	i i	4060 Snowy EGRET DRIVE		
CITY-ST-ZIP	WEST MELBOURNE FL 32904		1.4 CITY-S	T-ZIP			
TITLE	VP	☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME	HAGAN, MICHELLE D		II _	ĺ		Change	Addition
STREET ADDRESS	1000 0011111 201101 011112		2.2 NAME		A second of the power	☑ Change	Addition
			2.3 STREET		4060 Snowl EGRET DRIVE	☑ Change	Addition .
CITY-ST-ZIP	4060 SUNNY EGRET DRIVE WEST MELBOURNE FL 32904	□ ngi etc	2.3 STREET 2.4 CITY-S		4060 SNOWY EGRET DRIVE		
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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 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 changed, or or an attachment with an address, with all other like empowered.

SIGNATURE:

C/TY-ST-ZIP

ME OF SIGNING OFFICER OR DIRECTOR

407-28-8003