CR2E034

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 # P9800003943

1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

CLASSIC BRICK CORPORATION

CANCELLED MAR 3 1 1998

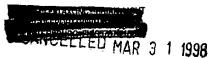
1761 DONCASTER

REJECTED JAN 0 6 1999

Principal Place of Business - PERSONAL CONTRACTOR

Mailing Address

2a. Mailing Address



DO NOT WRITE IN THIS SPACE

59-3488741

5. Certificate of Status Desired

4. FEI Number

3. Date Incorporated or Qualifed 01/12/1998

FILED Apr 16, 1999 8:00 am

Secretary of State

04-16-1999 90079 041 ***158.75

HOT ACTIONS - CAN'T ON FORLIARD

Applied For Not Applicable \$8.75 Additional

Suite, Apt. #, etc.

26 17 61 DONCASTER

City & State CLEARWATER

6. Election Campaign Financing Trust Fund Contribution

Fee Required \$5.00 May Be Added to Fees

CLEARWATER Country Country 25

9. Name and Address of Current Registered Agent

8. This corporation owes the current year Intangible Personal Property Tax. 10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

81 Name CHRISTINE VEAR

82 Street Address (P.O. Box Number is Not Acceptable)

10. Name and Address of New Registered Agent

83 Name CHRISTINE VEAR

84 City CLEARWATER FL 85 Zip Code

85 Zip Code

86 City CLEARWATER FL 85 Zip Code

87 Street Address (P.O. Box Number is Not Acceptable)

88 City CLEARWATER FL 85 Zip Code

89 Street Address (P.O. Box Number is Not Acceptable)

80 Name and Address of New Registered Agent

81 Name CHRISTINE VEAR

82 Street Address (P.O. Box Number is Not Acceptable)

83 Name CHRISTINE VEAR

84 City CLEARWATER FL 85 Zip Code

85 Zip Code

86 Street Address (P.O. Box Number is Not Acceptable)

87 Name and Address of New Registered Agent

88 Name CHRISTINE VEAR

89 Street Address (P.O. Box Number is Not Acceptable)

80 Name and Address of New Registered Agent

80 Name CHRISTINE VEAR

80 Name CHRISTINE VEAR

81 Name CHRISTINE

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83 Name CHRISTINE

84 City CLEARWATER FL 85 Zip Code

85 Zip Code

86 Street Address (P.O. Box Number is Not Acceptable)

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82 Name CHRI

SIGNAT	TURE		んて		V	-
		Signature, typed o	or printed	name of r	egistered	agent and
				-		4455

title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change DELETE 1.1 TITLE PRESIDENT TITLE 1.2 NAME NAME **VEAR, CHRISTINE E** 1761 DONCASTER 1.3 STREET ADDRESS STREET ADDRESS LEARWATER 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE ☐ Change 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2, 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4, 2 NAME NAME 4,3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIF ☐ Change Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY-ST-ZIE CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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, with all other like empowered.

SIGNATURE: