

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 09, 2002 8:00 am
Secretary of State

07-09-2002 90017 028 ***150.00

DOCUMENT # P99000003509
 1. Entity Name
CLASSICAL & INNOVATIVE DESIGNS, INC.

Principal Place of Business 3132 W. 71 PLACE HIALEAH FL 33018	Mailing Address 3132 W. 71 PLACE HIALEAH FL 33018
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0897814	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ESTIVILL, MIGUEL A
3132 W 71 PL
HIALEAH FL 33018

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip Code _____

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Miguel A Estivill* DATE _____
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ESTIVILL, MIGUEL 3132 W. 71 PLACE HIALEAH FL 33018	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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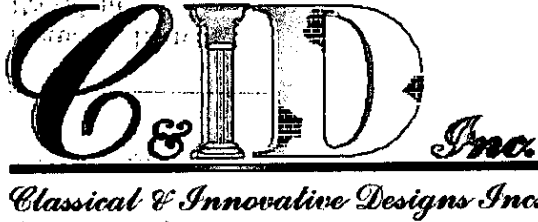
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Miguel A Estivill* **ESTIVILL, MIGUEL A** **7/2/02** **(954) 868-5366**

CR2E034 (4/02)

Attachment

P99000003509
119473



Miguel A. Estivill

3132 W 71 Place
Hialeah, Florida 33018
Tel: (305) 827-6664
Cell: (954) 868-5366

**FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS**

The intent of this Letter is to inform you that Classical & Innovative Designs Inc. Did not received prior notice to file the 2002 Uniform Business Report.

By this mean I respectfully request for the late fee to be waived

Any further questions, please feel free to contact me at the above address

Sincerely,

Miguel A. Estivill
President

MIGUEL A. ESTIVILL
PRESIDENT