2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000003509

Entity Name: CLASSICAL & INNOVATIVE DESIGNS, INC.

FILED Mar 18, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
- a	iton i inicipal i lace di Dacinico

10660 NW 123 STREET ROAD # 105 MEDLEY, FL 33178

Current Mailing Address: New Mailing Address:

10660 NW 123 STREET ROAD # 105 MEDLEY, FL 33178

FEI Number: 65-0897814 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ESTIVILL, MIGUEL A 4634 NW 97 PL DORAL, FL 33178 US

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: ESTIVILL, MIGUEL A Address: 4634 NW 97 PL City-St-Zip: DORAL, FL 33178 US

Title: PD

Name: ESTIVILL, MIGUEL A

Address: 10660 NW 123 STREET ROAD 105

City-St-Zip: MEDLEY, FL 33178

Title: PD

Name: ESTIVILL, MIGUEL A

Address: 10660 NW 123 STREET ROAD 105

City-St-Zip: MEDLEY, FL 33178

Title: PD

Name: ESTIVILL, MIGUEL A

Address: 10660 NW 123 STREET ROAD 105

City-St-Zip: MEDLEY, FL 33178

Title: PD

Name: ESTIVILL, MIGUEL A

Address: 10660 NW 123 STREET ROAD 105

City-St-Zip: MEDLEY, FL 33178

Title: PD

Name: ESTIVILL, MIGUEL A

Address: 10660 NW 123 STREET ROAD 105

City-St-Zip: MEDLEY, FL 33178

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MIGUEL A. ESTIVILL PD 03/18/2011