2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000101755

1. Entity Name:
CLASSIC SCOOTER RENTAL, INC.

Principal Place of Business	Mailing Address
8307 THOMAS DR. PANAMA CITY, FL 32408 US	8307 THOMAS DR. PANAMA CITY, FL 32408 US

DO NOT WRITE IN THIS SPACE

08082006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3616219
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HESS, BRIAN D
9108 FRONT BCH RD.
PANAMA CITY, FL 32407

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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 _____ DATE
(Signature typed or printed name of registered agent and title if applicable) (NOTE: If registered agent signature required when changing)

FILE NOW!!! FEE IS $150.00
Due by September 15, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

☐ In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PS
NAME	HAND, PERRY
STREET ADDRESS	7024 SOUTH LAGOON DRIVE
CITY-ST-ZIP	PANAMA CITY BCH, FL 32408
TITLE	T
NAME	HAND, DOTTIE
STREET ADDRESS	7024 SOUTH LAGOON DRIVE
CITY-ST-ZIP	PANAMA CITY, FL 32408
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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09/13/06-80002-011 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Perry Hand Pres 9-11-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #