


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90279 008 ***150.00

DOCUMENT # 470992
 1. Entity Name
 F G REALTY, INC.



Principal Place of Business Mailing Address
 3107 STIRLING ROAD 7400 OCEAN TERRACE 3107 STIRLING ROAD
 201 FORT LAUDERDALE, FL 33312 201 FORT LAUDERDALE, FL 33312
 MIAMI BEACH FL 33141

DO NOT WRITE IN THIS SPACE

40086969



03082006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1651937 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 GALEA, VINCENT
 7400 OCEAN TERRACE
 MIAMI BEACH, FL 33141

DO NOT WRITE IN THIS SPACE

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 Vincent Galea VINCENT GALEA PRESIDENT 04/2/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GALEA, VINCENT
STREET ADDRESS	7400 OCEAN TERRACE
CITY-ST-ZIP	MIAMI BEACH, FL 33141
TITLE	VST
NAME	GALEA, SALVATORE
STREET ADDRESS	7400 OCEAN TERRACE
CITY-ST-ZIP	MIAMI BEACH, FL 33141
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Vincent Galea VINCENT GALEA 04/20/06 306 8900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #