


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000101483

1. Entity Name
2661 REALTY, INC.



Principal Place of Business
1941 N DIXIE HWY #7
POMPANO BEACH, FL 33060

Mailing Address
1941 N DIXIE HWY #7
POMPANO BEACH, FL 33060



01082006 No Chg-P CR2E034 (11/05)

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4. FEI Number
26-0070950

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

DAWSON, BARRY
1941 N DIXIE HWY #7
POMPANO BEACH, FL 33060

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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: Registered Agent signature required when reinstating)

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

1100000382356
01/12/06-80034-014 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DAWSON, BARRY
STREET ADDRESS	1941 N DIXIE HWY #7
CITY-ST-ZIP	POMPANO BEACH, FL 33060
TITLE	D
NAME	COLANGELO, ANTHONY
STREET ADDRESS	1941 NO. DIXIE HWY #7
CITY-ST-ZIP	POMPANO BEACH, FL 33060
TITLE	D
NAME	DEROSARIO, ANTONIO S
STREET ADDRESS	1941 N. DIXIE HWY
CITY-ST-ZIP	POMPANO BEACH, FL 33060
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: Anthony Calogio 1/6/06 (954) 298-8979
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #