

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000082760

Entity Name: FIRST CLASS VACATIONS, INC.

FILED
Dec 02, 2005
Secretary of State

Current Principal Place of Business:

6100 N. FEDERAL HWY
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

6100 N. FEDERAL HWY
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: 20-1166907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAHOM, JEFFREY
6100 N. FEDERAL HWY
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

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: P,T () Delete
Name: ROSENBLUM, MARILYN
Address: 4601 WINDWARD COVE LANE
City-St-Zip: WELLINGTON, FL 33467

Title: VP,S () Delete
Name: ROSENBLUM, BARRY
Address: 4601 WINDWARD COVE LANE
City-St-Zip: WELLINGTON, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S (X) Change () Addition
Name: NAHOM, JEFFREY
Address: 6100 N. FEDERAL HIGHWAY
City-St-Zip: BOCA RATON, FL 33487

Title: VP,T (X) Change () Addition
Name: NAHOM, RICHARD
Address: 6100 N. FEDERAL HIGHWAY
City-St-Zip: BOCA RATON, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: RICHARD NAHOM

VP

12/02/2005

Electronic Signature of Signing Officer or Director

Date