

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000018120

**Entity Name:** CLASS VENTURES, LLC

**Current Principal Place of Business:**

4616 FORMBY CT  
KISSIMMEE, FL 34746

**Current Mailing Address:**

4616 FORMBY CT  
KISSIMMEE, FL 34746 US

**FEI Number:** 45-4468180

**Certificate of Status Desired:** No

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

LARSON ACCOUNTING & CONSULTING SERVICES LL  
8615 COMMODITY CIR  
6  
ORLANDO, FL 32819 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

**Authorized Person(s) Detail :**

Title AUTHORI, AUTHORIZED MEMBER  
Name NAGEM, HALIM  
Address 4616 FORMBY COURT  
City-State-Zip: KISSIMMEE FL 34746

Title AUTHORIZED MEMBER  
Name NAGEM, CARLOS ANDRE  
Address 4616 FORMBY CT  
City-State-Zip: KISSIMMEE FL 34746

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** HALIM NAGEM

AMBR

03/27/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date