

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000112585

Entity Name: CLASSIC REALTY SERVICES, INC.

FILED
Oct 11, 2007
Secretary of State

Current Principal Place of Business:

17107 PINES BLVD
PEMBROKE PINES, FL 33027 US

New Principal Place of Business:

1570 SW 190 AVENUE
PEMBROKE PINES, FL 33029 US

Current Mailing Address:

17107 PINES BLVD
PEMBROKE PINES, FL 33027 US

New Mailing Address:

1570 SW 190 AVENUE
PEMBROKE PINES, FL 33029 US

FEI Number: 65-1058206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAROON, FAISAL
17107 PINES BLVD
PEMBROKE PINES, FL 33027 US

Name and Address of New Registered Agent:

HAROON, FAISAL
1570 SW 190 AVENUE
PEMBROKE PINES, FL 33029 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: FAISAL HAROON

10/11/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HAROON, FAISAL
Address: 17107 PINES BLVD
City-St-Zip: PEMBROKE PINES, FL 33027 US

Title: D () Delete
Name: MOTEN, ANWAR
Address: 5008 NW 113 AVE
City-St-Zip: POMPANO BEACH, FL 33076 US

Title: D (X) Delete
Name: ABID, ABDUL A
Address: 2893 SW 13TH DRIVE
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: D (X) Delete
Name: MOHAMMOD, KARIM H
Address: 3001 BOGATA AVE
City-St-Zip: COOPER CITY, FL 33026 US

Title: D (X) Delete
Name: AFZAL, MAJID
Address: 1408 SOUTH POWERLINE RD
City-St-Zip: POMPANO BEACH, FL 33069 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AMIN, ANILA
Address: 1570 SW 190 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: VPD (X) Change () Addition
Name: HAROON, FAISAL
Address: 1570 SW 190 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: FAISAL HAROON

D

10/11/2007

Electronic Signature of Signing Officer or Director

Date