

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91190 008 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000112585					
1. Entity Name CLASSIC REALTY SERVICES, INC.					
Principal Place of Business 17107 PINES BLVD PEMBROKE PINES, FL 33027			Mailing Address 17107 PINES BLVD PEMBROKE PINES, FL 33027		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-1058206	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HAROON, FAISAL 17107 PINES BLVD PEMBROKE PINES, FL 33027			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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's signature required when submitting.)					
FILE NOW!!! FEE IS \$150.00 After May 15, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	HAROON, FAISAL		NAME		
STREET ADDRESS	17107 PINES BLVD		STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES, FL 33027		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	MOTEN, ANWAR		NAME	5008 NW 113 Ave	
STREET ADDRESS	2893 SW 13TH DRIVE		STREET ADDRESS	Coral Springs FL, 33076	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	ASID, ABDUL A		NAME		
STREET ADDRESS	2893 SW 13TH DRIVE		STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	MOHAMMAD, KARIM H		NAME		
STREET ADDRESS	3001 BOGATA AVE		STREET ADDRESS		
CITY-ST-ZIP	COOPER CITY, FL 33026		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	AFZAL, MAJID		NAME		
STREET ADDRESS	1406 SOUTH POWERLINE RD		STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH, FL 33069		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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/other like empowered.					
SIGNATURE:  DATE: 4/17/03					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

Fawaz Haroon

20031593



☐ CHECK HERE IF MAKING CHANGES

CR2E034 (1/0/02)