1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000036297

1. Corporation Name

CLASSIC REALTY GROUP, INC.

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90014 044 ***150.00



Principal Place	e of Business	Mailing Address				
2737 E. OAKLA	ND PARK BLVD.	2737 E. OAKLAND PARK BLVD.				
SUITE 103H FT. LAUDERDALE FL 33306 SUITE 103H FT. LAUDERDALE FL 33306				DO NOT WOLLE IN THE	e edace	
				DO NOT WRITE IN THIS SPACE		
				 Date Incorporated or Qualifed 05/09/1995 		
a Delevioni D	lace of Business	2a. Mailing Address		4. FEI Number		pplied For
		2a. Walling Address	and Blud	65-0586559		ot Applicable
21 24		22. Mailing Address 26. 2475 Holyw Suite, Apt. #, etc. 27. Hollywood	00.00	03 0300338		Additional
Suite, Apt.	م المسيسي ا	Suite, Apr. #, etc.	TIA	5. Certifcate of Status Desired		lequired
	llywood, MA	City & State	<u> </u>	Floring Consider Financian		
City & Stat	e •	⊢ ,		6. Election Campaign Financing Trust Fund Contribution	•	May Be to Fees
23	Courte		ountry			10 1 000
Zip 24 ろろのる	Country	□	Ouritry	8. This corporation owes the current year linear personal Property Tax.	Yes	No
24 3300				10. Name and Address of New Registere		
	9. Name and Address of Curre	nt Registered Agent	81 Name	TO. Nume und Addition of the Artegione.		
MOR	RABITO, J					
	ARHTUR STREET		Street Address (P.O. Box Number is Not Acceptable)			
	LYWOOD FL 33019					
noc	ELMOOD LE 22019		83			
			84 City		85 Zip	Code
				poration submits this statement for the purpose	_	
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Florida Si	atutes.	on's board of directors. I hereby accept the app		
	Signature, typed or printed name of registered age		red Agent signature require		NID DIDEOT	000 111 40
12.			3.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	
TITLE	P	_	TITLE	•		
NAME	MORABITO, STACEY		NAME	Hollywood, FIA 33	<u>[</u>	
STREET ADDRESS	2737 E. OAKLAND PARK BLVI	D., SUITE 103H	STREET ADDRESS	14 13 11P1144	020	
CITY-ST-ZIP	FT. LAUDERDALE FL 33306		CITY-ST-ZIP	Hollywood, 114 90	Change	Addition
TITLE		DELETE 2.	TITLE	•	Change	
NAME		2:	! NAME			
STREET ADDRESS		2.5	STREET ADDRESS			
CITY-ST-ZIP		2.	4 CITY-ST-ZIP			
TITLE		☐ DELETE 3:	TITLE		☐ Change	Addition
NAME		33	NAME			
STREET ADDRESS		3.3	STREET ADDRESS			
CITY-ST-ZIP		3,	I. CITY-ST-ZIP			
TITLE		☐ DELETE 4.	TITLE		☐ Change	Addition
NAME		4.	2 NAME			
STREET ADDRESS	}	4.	STREET ADDRESS			
		1	CITY-ST-ZIP			
CITY-ST-ZIP TITLE			I TITLE		☐ Change	Addition
NAME			NAME			
			STREET ADDRESS			
STREET ADDRESS		i i	CITY-ST-ZIP			
CITY-ST-ZIP			I TITLE		Change	Addition
TITLE			NAME			
NAME		6.	I TWWYIL			
	[■	STREET LOCDESS			
STREET ADDRESS			STREET ADDRESS			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

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