

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S08024

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: FIRST CLASS RESORTS, INC.

## Current Principal Place of Business:

ONE ALHAMBRA PLAZA  
STE. 1150  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

## Current Mailing Address:

ONE ALHAMBRA PLAZA  
STE. 1150  
CORAL GABLES, FL 33134 US

## New Mailing Address:

FEI Number: 65-0223830      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MIR, HECTOR J.  
2655 LE JEUNE RD.  
SUITE 1107  
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: MIR, HECTOR J.  
Address: 2655 LE JEUNE RD #107  
City-St-Zip: CORAL GABLES, FL

Title: DP ( ) Delete  
Name: GONZALEZ-PEREZ, FRANCISCO J  
Address: 8 OLD CHURCH ST  
City-St-Zip: LONDON SW3 5DQ,

Title: D (X) Delete  
Name: GONZALEZ-PAEZ, FRANCISCO J  
Address: KAYA GOBERNADOR N DEBROT  
City-St-Zip: KRALENDISK BONAIRE,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition  
Name: MIR, HECTOR J.  
Address: 2655 LE JEUNE RD #107  
City-St-Zip: CORAL GABLES, FL 33134

Title: DP (X) Change ( ) Addition  
Name: GONZALEZ-PAEZ, FRANCISCO J  
Address: 8995 SCHOOLHOUSE ROAD  
City-St-Zip: CORAL GABLES, FL 33156

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: HECTOR J. MIR

S

04/20/2009

Electronic Signature of Signing Officer or Director

Date