

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90420 013 ***158.75

DOCUMENT # S31344

1. Entity Name
CLASSIC REALTY, INC. OF SOUTH FLORIDA



Principal Place of Business 17121 NE 6TH AVENUE NORTH MIAMI BCH, FL 33162 US	Mailing Address 17121 NE 6TH AVENUE NORTH MIAMI BCH, FL 33162 US
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50013231



04102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0240272	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

JOHN-LATIMER, ANN
 17121 NE 6TH AVENUE
 N MIAMI BCH, FL 33162

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHN-LATIMER, ANN 11700 SW 9TH COURT PEMBROKE PINES, FL 33025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD LATIMER, JR, OTTO V 11700 SW 9TH COURT PEMBROKE PINES, FL 33025
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/06
 Date

305-653-8546
 Daytime Phone #