


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000012617
 1. Entity Name
 595 REALTY CORP.



Principal Place of Business Mailing Address
 595 EAST 10TH AVENUE 595 EAST 10TH AVENUE
 HIALEAH, FL 33010 HIALEAH, FL 33010

DO NOT WRITE IN THIS SPACE

U00000474128
 04/04/06-80010-022 150.00



02232008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 65-0825217 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ALTER, RONALD A
 81 N.E. 39TH STREET
 MIAMI, FL 33137

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 _____
Signature, typed or printed name of registered agent and title if applicable. (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	D
NAME	FLASTER, ALVIN
STREET ADDRESS	595 EAST 10TH AVENUE
CITY-ST-ZIP	HIALEAH, FL 33010
TITLE	D
NAME	FLASTER, RICHARD
STREET ADDRESS	595 EAST 10TH AVENUE
CITY-ST-ZIP	HIALEAH, FL 33010
TITLE	D
NAME	FLASTER, NORMA
STREET ADDRESS	595 EAST 10TH AVENUE
CITY-ST-ZIP	HIALEAH, FL 33010
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: Alvin Flaster ALVIN FLASTER 3/13/06 305-887-0777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone