


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P97000092499		
1. Entity Name 689 NE 125 STREET CORPORATION		
Principal Place of Business 25040 ASCOT LAKE CT. BONITA SPRINGS, FL 34134 US		Mailing Address 25040 ASCOT LAKE CT. BONITA SPRINGS, FL 34134 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent WIEBEL, DOUGLAS E 9240 BONITA BEACH RD STE 200 BONITA SPRINGS, FL 34135		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST MITTHOF, HANS MOHBUEHL STR.1 BAD WURZACH GERMANY, 84410	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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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: <u><i>H. Mitthof</i></u> (H. MITTHOF) Pres.		Date <u>2/3/06</u> Daytime Phone # <u>239-495-0006</u>



02032006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0794297	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

UN00000426074
02/20/06-80030-006 150.00

**DO NOT WRITE
IN THIS SPACE**