

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J84287

Entity Name: 189TH ST., INC.

FILED  
May 04, 2009  
Secretary of State

## Current Principal Place of Business:

8495 TWIN LAKE DRIVE  
BOCA RATON, FL 33496 US

## New Principal Place of Business:

## Current Mailing Address:

8495 TWIN LAKE DRIVE  
BOCA RATON, FL 33496 US

## New Mailing Address:

FEI Number: 59-2840219

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALAN B. COHN ESQ.  
100 WEST CYPRESS CREEK ROAD  
SUITE 700  
FT. LAUDERDALE, FL 33309 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DSV ( ) Delete  
Name: FINKEL, NATHAN  
Address: 706 KASER STATION ROAD  
City-St-Zip: FRIENDSVILLE, TN 37737

Title: DP ( ) Delete  
Name: FREEDMAN, MARTIN B  
Address: 4481 GARDEN POINT TRAIL  
City-St-Zip: WELLINGTON, FL 33414

Title: DVP ( ) Delete  
Name: FINKEL, JACQUELINE  
Address: 706 KASER STATION ROAD  
City-St-Zip: FRIENDSVILLE, TN 37737

Title: DVPT ( ) Delete  
Name: FINKEL FREEDMAN, GRACIE  
Address: 8495 TWIN LAKE DRIVE  
City-St-Zip: BOCA RATON, FL 33496

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARTIN B. FREEDMAN

PRES

05/04/2009

Electronic Signature of Signing Officer or Director

Date