

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000081784

Entity Name: US ON 19, INC.

FILED  
May 01, 2006  
Secretary of State

## Current Principal Place of Business:

38874 US 19 N  
PALM HARBOR, FL 34685

## Current Mailing Address:

38874 US 19 N  
PALM HARBOR, FL 34685

## New Principal Place of Business:

1261 BAY HARBOR  
301  
PALM HARBOR, FL 34685

## New Mailing Address:

35246 US HWY 19 N  
331  
PALM HARBOR, FL 34684

FEI Number: 20-0159949

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 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: D ( ) Delete  
Name: ROLFE, KAREN  
Address: 38874 US 19 N  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: D ( ) Delete  
Name: BONILLA, MARLENE  
Address: 38874 US 19 N  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: D ( ) Delete  
Name: BONILLA, MELISSA  
Address: 38874 US 19 N  
City-St-Zip: TARPON SPRINGS, FL 34689

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ROLFE, KAREN  
Address: 1261 BAY HARBOR DR # 331  
City-St-Zip: PALM HARBOR, FL 34685

Title: D (X) Change ( ) Addition  
Name: BONILLA, MARLENE  
Address: 1261 BAY HARBOR DR # 301  
City-St-Zip: PALM HARBOR, FL 34685

Title: D (X) Change ( ) Addition  
Name: BONILLA, MELISSA  
Address: 1261 BAY HARBOR DR # 301  
City-St-Zip: PALM HARBOR, FL 34685

I hereby certify that the information supplied with this filing does not qualify for the 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: KAREN ROLFE

D

05/01/2006

Electronic Signature of Signing Officer or Director

Date