2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 25, 2006 08:00 AN Secretary of State **DOCUMENT # P93000027331** FIRST STREET GALLERY, INC. Principal Place of Business Mailing Address 204 FIRST STREET, NW 204 FIRST STREET, NW HAVANA FL 32333 US HAVANA FL 32333 US 03062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3211225 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **ECHTERNACHT, KENNETH** DO NOT WRITE 3220 SHARER RD. TALLAHASSEE, FL 32312 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. (NCTE: Registered Agent aignature required when reinstaling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE ECHTERNACHT, KENNETH NAME STREET ADDRESS 3220 SHARER ROAD CITY-ST-ZIP TALLAHASSEE, FL 32312 VP TITLE MARANI, JEAN MAKE STREET ADDRESS 3011 MERIDIAN RD CITY-ST-ZIP TALLAHASSEE, FL 32312 MLE ECHTERNACHT, GLORIA MARKET STREET ADDRESS 3220 SHARER RD DO NOT WRITE CITY-ST-ZIP TALLAHASSEE, FL 32312 TITLE IN THIS SPACE ECHTERNACHT, GLORIA NAME STREET ADDRESS 3220 SHARER RD CITY-ST-ZIP TALLAHASSEE, FL 32312 TITLE NAME STREET ADDRESS CTY-57-78 7371 F MAME STREET ADDRESS CITY-ST-ZIP

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 with 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 employered 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 attactive or with an address, with altypider like empowered.

SIGNATURE:

CONSTRUCT AND PROPERTY OF SECURITY OFFICER OF DEFECTOR

4-24-2006

Daytime Phone #

FILED