2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000027331

1. Entity Name

FIRST STREET GALLERY, INC.



Principal Place of Business

204 FIRST STREET, NW HAVANA, FL 32333 US Mailing Address

204 FIRST STREET, NW HAVANA, FL 32333 US FILED
Apr 21, 2008 08:00 A
Secretary of State



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02232008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3211225

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

ECHTERNACHT, KENNETH 3220 SHARER RD. TALLAHASSEE, FL 32312

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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)

DAT

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 **9.** Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees U00000912776 05/07/08-80092-020 150.00

10. OFFICERS AND DIRECTORS TITLE ECHTERNACHT, KENNETH NAME STREET ADDRESS 3220 SHARER ROAD TALLAHASSEE, FL 32312 CITY-ST-ZIP VΡ TITLE MARANI, JEAN NAME 3011 MERIDIAN RD STREET ADORESS. CITY-ST-ZIP TALLAHASSEE, FL 32312 TITLE NAME ECHTERNACHT, GLORIA STREET ADORESS 3220 SHARER RD TALLAHASSEE, FL 32312 TITLE ECHTERNACHT, GLORIA NAME 3220 SHARER RD STREET ADORESS CITY-ST-ZIP TALLAHASSEE, FL 32312 TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 507, 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.

CIGNATURE.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

Ideal 4-17-2008

ayorne Phone # 1/1/2