

FROM :

PHONE NO. :

Apr. 01 2006 09:39AM P1

FILED

Apr 10, 2006 08:00
Secretary of State**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P98000040555

1. Entity Name
FIRST NINETEENTH AVE., INC.

Principal Place of Business

2650 S.E. 19TH AVE.
CAPE CORAL, FL 33904

Mailing Address

2650 S.E. 19TH AVE.
CAPE CORAL, FL 33904

03312008

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE4. FPI Number
65-0834345Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RUHNAU, DIETER
2650 S.E. 19TH AVE.
CAPE CORAL, FL 33904**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

Signature, typed or printed name of registered agent and title if applicable

(and if, Registered Agent, signature required when resigning)

DATE

**FILE NOW!!! FEE IS \$160.00
After May 1, 2006 Fee will be \$550.00**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	RUHNAU, DIETER
STREET ADDRESS	2650 S.E. 19TH AVE.
CITY-ST-ZIP	CAPE CORAL, FL 33904
TITLE	D
NAME	RUHNAU, ILSE
STREET ADDRESS	2650 S.E. 19TH AVE.
CITY-ST-ZIP	CAPE CORAL, FL 33904
TITLE	D
NAME	RUHNAU, JULIA
STREET ADDRESS	2650 S.E. 19TH AVE.
CITY-ST-ZIP	CAPE CORAL, FL 33904
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000197453
04/22/06-80054-011 150.00**DO NOT WRITE
IN THIS SPACE**

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 designated, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Dieter Ruhnau, DIETER RUHNAU 04.03.06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Payable Through