## 2007 FOR PROFIT CORPORATION . ANNUAL REPORT

## **FILED** Jan 26, 2007 08:00 AM **DOCUMENT # P05000051275 Secretary of State** MAIN STREET AMERICA, INC. Principal Place of Business Mailing Address P 0 BOX 951826 P 0 B0X 951826 LAKE MARY, FL 32795-1826 LAKE MARY, FL 32795-1826 01232007 No Chq-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2633199 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MICCIOSCIA, LOUIS P DO NOT WRITE 3346 HORSESHOE BEND COURT LONGWOOD, FL 32779 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 egent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS **PSTD** TITLE MISCIOSCIA, LOUIS P NAME STREET ADDRESS 3346 HORSESHOE BEND CT CITY-ST-ZIP LONGWOOD, FL 32779 000000604883 01/30/07-80013-024 150.00 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP ΠIF NAME

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

STREET ADDRESS CITY-ST-ZIP

CICMATI IDE.

NAME STREET ADDRESS CITY-ST-ZIP