

# 2004 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

2004 NOV 24 PM 12:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L02000005583

1. Entity Name  
MAIN STREET HOLDINGS LLC



Principal Place of Business  
265 S. HIBISCUS DR  
MIAMI BEACH, FL 33139

Mailing Address  
265 S. HIBISCUS DR  
MIAMI BEACH, FL 33139

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10212004 REIN-LLC

CR2E101 (6/04)

4. FEI Number  
02-0556595

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAYES, BEN J  
9410 INTERNATIONAL CT N  
ST PETERSBURG, FL 33716

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

FILE NOW!!! FEE IS \$150.00  
After January 1, 2005, Fee will be \$200.00

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
HELLER, DAVID  
265 N. HIBISCUS DR  
MIAMI BEACH, FL 33139 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
HELLER, DAVID  
265 N. HIBISCUS DR  
MIAMI BEACH, FL 33139 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
900042320  
10/29/04--01073--013 \*\*\$50.00 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
Heller, David  
1300 N.E. 94th St  
Miami Shores, FL 33138 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Overtime Phone #



November 22, 2004

Ms. Tammi Cline  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Ref. Number: L02000005583

Dear Ms. Cline:

I am resending you the Limited Liability Reinstatement Form that I originally sent in October. This form was returned to me with the letter number 504A00065131 stating that the fee was \$150.

Per our conversation, I wanted to state again that I had never received the original reinstatement form. It was only after I received a notice of revocation that I contacted your office.

Please also be aware that we have moved from our old address. We are no longer at 265 North Hibiscus Drive, Miami Beach, FL 33139. Our NEW address is 1300 N.E. 94<sup>th</sup> Street, Miami Shores, FL 33138.

I appreciate all of your help on this matter and please don't hesitate to contact me if you have any questions. Thank you!

Sincerely,



David Heller

1300 N.E. 94<sup>th</sup> Street,  
Miami Shores, FL 33138.  
(305)535-3955