

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 28 PM 1:45

DOCUMENT # J88018 (3)

1. Corporation Name

MAIN BAR, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
% GERALDINE SAAH 1944 MAIN STREET SARASOTA FL 34236	% GERALDINE SAAH 1944 MAIN STREET SARASOTA FL 34236

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
29	30

3. Date Incorporated or Qualified	3a. Date of Last Report
08/14/1987	03/24/1994
4. FEI Number	Applied For
59-2093223	Not Applicable
5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing	☐ \$5.00 May Be Added to Fees
Trust Fund Contribution	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	☒ Yes ☐ No

9. Name and Address of Current Registered Agent	
SAAH, GERALDINE 1944 MAIN STREET SARASOTA FL 34236	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
(Signature typed or printed name of registered agent and title of corporation) (Signature typed or printed name of registered agent and title of corporation) (Signature typed or printed name of registered agent and title of corporation)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☐ Change ☐ Addition
NAME	SAAH, GERALDINE	1.2 NAME	
STREET ADDRESS	641 TYLER DRIVE	1.3 STREET ADDRESS	
CITY, ST, ZIP	SARASOTA FL	1.4 CITY, ST, ZIP	
TITLE	DV	2.1 TITLE	☐ Change ☐ Addition
NAME	SAAH-PROFFITT, SHANA	2.2 NAME	
STREET ADDRESS	348 LANTANA AVE.	2.3 STREET ADDRESS	
CITY, ST, ZIP	SARASOTA FL	2.4 CITY, ST, ZIP	
TITLE	DTS	3.1 TITLE	☐ Change ☐ Addition
NAME	SAAH, SHANE	3.2 NAME	
STREET ADDRESS	481 NORTH SHORE DRIVE	3.3 STREET ADDRESS	
CITY, ST, ZIP	SARASOTA FL	3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(6), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 person or person empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Geraldine Saah Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
GERALDINE SAAH

3-16-95 (813) 955-8733