

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # J88018

1. Entity Name
MAIN BAR, INC.



Principal Place of Business
**% GERALDINE SAAH
1944 MAIN STREET
SARASOTA, FL 34236**

Mailing Address
**% GERALDINE SAAH
1944 MAIN STREET
SARASOTA, FL 34236**

FILED

**Apr 07, 2004 08:00 AM
Secretary of State**



03172004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2093223

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**SAAH, GERALDINE
1944 MAIN STREET
SARASOTA, FL 34236**

**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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**000000105523
04/07/04-80029-008 150.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD SAAH, GERALDINE 641 TYLER DRIVE SARASOTA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVS SAAH-PROFFITT, SHANA 219 NORTH POLK DR SARASOTA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP SAAH, SHANE 481 NORTH SHORE DRIVE SARASOTA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 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.

SIGNATURE:

Geraldine Saah, Treas.

4/5/04

941-366-8733