


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Jul 31, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L33919**  
 1. Entity Name  
**MAIN STREET CAFE, INC.**



Principal Place of Business      Mailing Address  
**821 MAIN STREET**      **821 MAIN STREET**  
**DAYTONA BEACH, FL 32118**      **DAYTONA BEACH, FL 32118**

**DO NOT WRITE IN THIS SPACE**



07032006    No Chg-P    CR2E034 (11/05)

4. FEI Number <b>59-2991192</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**CORNELL, ALVA**  
**821 MAIN STREET**  
**DAYTONA BEACH, FL 32118**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 8, 2006**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD CORNELL, ALVA 821 MAIN STREET DAYTONA BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD CORNELL, VIRGINIA 821 MAIN STREET DAYTONA BEACH, FL
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 08/01/06-80007-010 150.00

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

**SIGNATURE:** *Alva Cornell*      **Alva CORNELL**      7/3/06      386 257 2323

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #