

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 DEC -3 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L78886**

1. Corporation Name

MAIN STREET INDUSTRIES, INC.

500002019155--2
-12/04/96--01041--011
***375.00 ***375.00

Principal Place of Business

FLORIDA

Mailing Address

c/o Philip Bart
3941 NE 31st Avenue
Lighthouse Pt., FL 33064

If above addresses are incorrect in any way, and through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

9763 Harbour Lake Circle

3. New Mailing Address, if Applicable

9763 Harbour Lake Circle

State, Apt. #, etc.

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City & State
Boynton Bch., FL 33437
33437

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Boynton Bch., FL 33437
33437

4. Fee Number

22-3055157

Applied For
(Not Applicable)

CERTIFICATE OF STATUS DESIRED ☐

6/8/90

REINSTATEMENT

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officer and/or Director	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
Pres	Marty Greenspan	9763 Harbour Lake Circle	Boynton Bch., FL 33437
VP	Philip Bart	4261 West McNab Road	Pompano Bch., FL 33069

8. Name and Address of Current Registered Agent

Thomas Tatum, Esq
200 E Las Olas Blvd #1800
Ft Lauderdale FL 33301 USA

9. Name and Address of New Registered Agent

Jeffrey M. Herman, Herman, Roof et al.
100 Southeast 2nd Street
Suite 2600
Miami FL 33131

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 897.002, F.S.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Jeffrey M. Herman

Date 12/2/96

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐

(See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not comply with the provisions of Section 119.07(1)(b) of the Florida Statutes. I understand that I am an officer or director of the corporation or business covered by this application and I understand that I am required to file this application with the Department of State and to pay the fee thereon. I understand that the information supplied with this application is true and correct, and that I am not aware of any information that would cause the corporation to be subject to the provisions of Section 119.07(1)(b) of the Florida Statutes. I understand that the information supplied with this application is true and correct, and that I am not aware of any information that would cause the corporation to be subject to the provisions of Section 119.07(1)(b) of the Florida Statutes.

SIGNATURE:

Marty Greenspan Pres 12/2/96