## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000119776

1. Entity Name

MAINSTREET RESOURCE SQUARE, INC.



SECRETARY OF STATE DIVISION OF CORPORATIONS

05 FEB 18 AM 8: 38

Principal Place of Business

Mailing Address

ONE FINANCIAL PLAZA SUITE 2212 FORT LAUDERDALE, FL 33394 ONE FINANCIAL PLAZA SUITE 2212 FORT LAUDERDALE, FL 33394



01182005

No Chg-P

CR2E034 (10/03)

4. FEI Number 69-0008818

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KILGALLON, PAUL J ONE FINANCIAL PLAZA SUITE 2212 FORT LAUDERDALE, FL 33394

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

PORT LAC	DUERUALE, FL 33394			IN T	THIS SPAC	CE	
the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or re	egistered agent, or bo	oth, in the State of Florida.	I am familiar with, and a	ccept
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered	i Agent signature	required when reinstating)	C	DATE	_
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	158.75		
10.	OFFICERS AND DIREC	CTORS	1.1.				
TITLE NAME STREET ADDRESS CITY-\$T-ZIP	D KILGALLON, PAUL J ONE FINANCIAL PLAZA SUITE 2212 FORT LAUDERDALE, FL 33394				and the state of t		д. 1
TITLE NAME STREET ADDRESS CITY-ST-ZIP			4 ag	03/( 03/(	80004747 31/0501013	79888 021 **308.7	5
NAME Street adoress City-St-Zip				DO	NOT WRI	TE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			÷ .	IN .	THIS SPA	CE ;	
TITLE NAME STREET ADDRESS CITY-SI-ZIP			, , , , , , , , , , , , , , , , , , ,				. i.
TITLE NAME . STREET ADDRESS CITY-ST-ZIP				· ·			
12. I hereby of	certify that the information supplied with this fit	ling does not qualify for the exer	nption stated	in Section 119.07(3)	(i), Florida Statutes. I furthe	or certify that the informa	ation

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 explowered 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 additest, with all other like empowered.

Paul J. Kilgatto