## **2008 FOR PROFIT CORPORATION** ANNUAL REPORT

**DOCUMENT # P05000018266** 

1. Entity Name

OLD MAIN STREET DECORATORS, INC.



Principal Place of Business

1600 1ST AVENUE WEST

APT. 506A

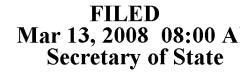
BRADENTON, FL 34205

Mailing Address

1600 1ST AVENUE WEST

APT. 506A

BRADENTON, FL 34205





CR2E034 (11/05) 03072008 No Chg-P

4. FEI Number 20-2278531 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CINCOTTA, MARGUERITE W 1600 1ST AVENUE WEST APT. 506A BRADENTON, FL 34205

DO NOT WRITE IN THIS SPACE

			1. C.		Take Triban 1994 to State Triban
	named entity submits this statement for the plons of registered agent.	urpose of changing its registere	ed office or re	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable (NOTE Registered	d Agent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000857351
10. OFFICERS AND DIRECTORS		TORS		* ; ;	
TITLE	P				
NAME	CINCOTTA, MARGUERITE W				
STREET ADDRESS	1600 1ST AVENUE WEST, APT. 506A				
CITY-ST-ZIP	BRADENTON, FL 34205			*	
TITLE	S				
NAME	CINCOTTA, MARGUERITE W				
STREET ADDRESS	1600 1ST AVENUE WEST, APT, 506A				The state of the s
CITY-ST-ZIP	BRADENTON, FL 34205		1.1 4 3		identicia di Caranta di La Caranta di Caranta
TITLE	Т				
NAME	CINCOTTA, MARGUERITE W				
STREET ADDRESS	1600 1ST AVENUE WEST ADT FORA			·	<u>[[[1]][[1]][[2]][[2][[2]][[2][[2][[2][[2</u>

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptio	ns 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 sh	
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?	

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

BRADENTON, FL 34205