

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000025801 (9)  
1. Corporation Name

MAIN STREET INVESTMENTS & FINANCIAL SERVICES, INC.

Principal Place of Business 10397 SOUTHERN BLVD.  
ROYAL PALM BEACH, FL 33411  
Mailing Address 10397 SOUTHERN BLVD.  
ROYAL PALM BEACH, FL 33411

3. Date Incorporated or Qualified 04/04/1994  
3a. Date of Last Report 04/04/1995

2. Principal Place of Business 21 10323 SOUTHERN BLVD.  
Suite, Apt. #, etc.  
2a. Mailing Address 26 10323 SOUTHERN BLVD.  
Suite, Apt. #, etc.

4. FEI Number 65-0479683  
Applied For Not Applicable

23 City & State ROYAL PALM BEACH, FL  
28 City & State ROYAL PALM BEACH, FL

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

24 Zip 33411 Country USA  
25 Zip 33411 Country USA

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ABLE, DIANE  
10397 SOUTHERN BOULEVARD  
ROYAL PALM BEACH, FL 33411

10. Name and Address of New Registered Agent

81 Name PATRICIA BALCH  
82 Street Address (P.O. Box Number is Not Acceptable) 10323 SOUTHERN BOULEVARD  
83  
84 City ROYAL PALM BEACH FL 85 Zip Code 33411

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Patricia Balch PATRICIA BALCH 4-25-96  
Signature typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	MILLER, ROBERT L.	
STREET ADDRESS	10397 SOUTHERN BLVD.	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE	V	<input type="checkbox"/> DELETE
NAME	ZBORIL, JAMES	
STREET ADDRESS	10397 SOUTHERN BLVD.	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE	V	<input type="checkbox"/> DELETE
NAME	AUSTIN, CHRISTOPHER	
STREET ADDRESS	10397 SOUTHERN BLVD.	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	ABLE, DIANE	
STREET ADDRESS	10397 SOUTHERN BLVD.	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

600001811676  
-05/07/96--01/25--004 Change ☐ Addition  
\*\*\*200.00

ST BALCH, PATRICIA  
10323 SOUTHERN BOULEVARD  
ROYAL PALM BEACH, FL 33411

5/1/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: Patricia Balch 4/25/96 (407) 790-1414  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)