2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **P94000025801** Apr 03, 2000 8:00 am Secretary of State 1. Entity Name MAIN STREET INVESTMENTS & FINANCIAL SERVICES, IN 04-03-2000 90159 030 ***150.00 Mailing Address Principal Place of Business 18679 SE FEDERAL HIGHWAY 18679 SE FEDERAL HIGHWAY TEQUESTA FL 33469-1721 TEQUESTA FL 33649 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FE) Number 65-0479683 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RUBENFELD, DAREN E Street Address (P.O. Box Number is Not Acceptable) 18679 SE FEDERAL HIGHWAY **TEQUESTA FL 33649** Zip Code 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change ☐ Addition PS TITLE Delete TITLE MILLER, ROBERT L NAME NAME STREET ADDRESS 18679 SE FEDERAL HIGHWAY STREET ADDRESS CITY-ST-ZIP **TEQUESTA FL** CITY-ST-ZIP 🔀 Delete ☐ Addition ☐ Change TITLE TITLE ZBORIL, JIM NAME STREET ADDRESS STREET ADDRESS 18679 SE FEDERAL HIGHWAY CITY-ST-ZIP CITY-ST-ZIP TEQUESTA FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE RUBENFELD, DAREN E NAME NAME STREET ADDRESS STREET ADDRESS 18679 SE FEDERAL HIGHWAY CITY-ST-ZIP CITY-ST-ZIP TEQUESTA FL ☐ Change Addition ☐ Delete TITLE TITLE AUSTIN, CHRISTOPHER NAME NAME STREET ADDRESS STREET ADDRESS 18679 SE FEDERAL HIGHWAY CITY-ST-ZIP CITY-ST-ZIP TEQUESTA FL Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

561-743-0014