

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000014048

**FILED**  
**Apr 11, 2008**  
**Secretary of State**

**Entity Name:** MAIN STREET MANAGEMENT SERVICES, INC.

**Current Principal Place of Business:**

416 CLEMATIS ST  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

325 CLEMATIS STREET  
# 148  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

416 CLEMATIS ST  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

325 CLEMATIS STREET  
# 148  
WEST PALM BEACH, FL 33401

FEI Number: 65-0779095

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RUBENFELD, DAREN L  
416 CLEMATIS ST  
WEST PALM BEACH, FL 33401 US

**Name and Address of New Registered Agent:**

ELESSAR, SHARI J  
416 CLEMATIS ST  
WEST PALM BEACH, FL 33401 US

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: SHARI ELESSAR

04/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MILLER, ROBERT  
Address: 416 CLEMATIS ST  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP (X) Delete  
Name: RUBENFELD, DAREN  
Address: 416 CLEMATIS ST  
City-St-Zip: WEST PALM BEACH, FL 33401

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: O/D (X) Change ( ) Addition  
Name: MILLER, ROBERT  
Address: 416 CLEMATIS ST.  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT MILLER

O/D

04/11/2008

Electronic Signature of Signing Officer or Director

Date