

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 23, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000096901

1. Entity Name
MAIN STREET JEWELRY & PAWN, INC.



Principal Place of Business
2109 B MAIN STREET
DUNEDIN, FL 34698

Mailing Address
2109 B MAIN STREET
DUNEDIN, FL 34698

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04212004 No Chg-P CR2E034 (10/03)

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4. FEI Number
59-3477758

Applied For
Not Applicable

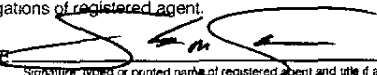
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SHEA, SHAUN M
4101 N BAY HILLS BLVD
SAFETY HARBOR, FL 34695

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE 
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/21/04
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE P
NAME SHEA, SHAUN M
STREET ADDRESS 4101 N BAY HILLS BLVD
CITY - ST - ZIP SAFETY HARBOR, FL 34695

TITLE S
NAME SHEA, KRISTIN K
STREET ADDRESS 5101 N BAY HILL BLVD
CITY - ST - ZIP SAFETY HARBOR, FL 34695

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

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04/23/04-80054-017 150.00

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/04
Date

(727) 733-3700
Daytime Phone #