

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90195 014 ***150.00

DOCUMENT # P99000050709	
1. Entity Name MAINBRACE ASSOCIATES, INC.	

Principal Place of Business 2814 N.E. 34TH COURT LIGHTHOUSE POINT, FL 33064	Mailing Address 2814 N.E. 34TH COURT LIGHTHOUSE POINT, FL 33064
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2. Principal Place of Business - No P.O. Box # 3040 NE 28th Avenue Suite, Apt. #, etc.	3. Mailing Address 3040 NE 28th Avenue Suite, Apt. #, etc.
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City & State Lighthouse Point, FL	City & State Lighthouse Point, FL
Zip 33064	Country US



04092007 Chg-P CR2E034 (12/06)

4. FEI Number 65-0931558	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MORAN, BRIAN F 2814 N.E. 34TH COURT LIGHTHOUSE POINT, FL 33064	7. Name and Address of New Registered Agent Name: Brian F. Moran Street Address (P.O. Box Number is Not Acceptable): 3040 NE 28th Avenue City: Lighthouse Point FL Zip Code: 33064
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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: _____ DATE: 4/11/07

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 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: DP NAME: MORAN, BRIAN F STREET ADDRESS: 2814 N.E. 34TH COURT CITY-ST-ZIP: LIGHTHOUSE POINT, FL 33064	<input type="checkbox"/> Delete	TITLE: <input checked="" type="checkbox"/> Change NAME: <input checked="" type="checkbox"/> Addition STREET ADDRESS: 3040 NE 28th Avenue CITY-ST-ZIP: Lighthouse Point, FL 33064	
TITLE: ST NAME: MORAN, KATHERINE STREET ADDRESS: 2814 NE 34 COURT CITY-ST-ZIP: LIGHTHOUSE, FL 33064	<input type="checkbox"/> Delete	TITLE: <input type="checkbox"/> Change NAME: <input type="checkbox"/> Addition STREET ADDRESS: CITY-ST-ZIP:	
TITLE: <input type="checkbox"/> Delete		TITLE: <input type="checkbox"/> Change NAME: <input type="checkbox"/> Addition STREET ADDRESS: CITY-ST-ZIP:	
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TITLE: <input type="checkbox"/> Delete		TITLE: <input type="checkbox"/> Change NAME: <input type="checkbox"/> Addition STREET ADDRESS: CITY-ST-ZIP:	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions 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 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:  Brian F. Moran, Pres. 4/11/07 (954) 768-0707

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #