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**Feb 12 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # 509621 (9)

1. Corporation Name
METRIC ENGINEERING INC.



Principal Place of Business
**13940 SW 136TH ST
SUITE 200
MIAMI FL 33186
US**

Mailing Address
**13940 SW 136TH ST
SUITE 200
MIAMI FL 33186-5541**

| | |
|--|--|
| 3. Date Incorporated or Qualified 07/27/1976 | 3a. Date of Last Report 02/19/1996 |
| 4. FEI Number 59-1685550 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

| | |
|---|--|
| 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country | 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country |
|---|--|

8. Name and Address of Current Registered Agent
**BENITEZ, VICTOR M.
8700 S.W. 124TH ST.
MIAMI FL 33176**

10. Name and Address of New Registered Agent

| | |
|---|-------------|
| 81 Name | 85 Zip Code |
| 82 Street Address (P.O. Box Number is Not Acceptable) | FL |
| 83 | |
| 84 City | |

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 _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

| | | |
|----------------|-----------------------------|---------------------------------|
| TITLE | PD | <input type="checkbox"/> DELETE |
| NAME | BENITEZ, VICTOR M. | |
| STREET ADDRESS | 14491 SW 161 ST | |
| CITY-ST-ZIP | MIAMI FL | |
| TITLE | VD | <input type="checkbox"/> DELETE |
| NAME | TELLECHEA, LUIS | |
| STREET ADDRESS | 11790 SW 27TH ST | |
| CITY-ST-ZIP | MIAMI FL | |
| TITLE | SD | <input type="checkbox"/> DELETE |
| NAME | BENITEZ, MANUEL | |
| STREET ADDRESS | 15216 SW 164 ST | |
| CITY-ST-ZIP | MIAMI FL | |
| TITLE | V | <input type="checkbox"/> DELETE |
| NAME | BALDWIN, CHARLES W. | |
| STREET ADDRESS | 13555 SW 105TH AVE | |
| CITY-ST-ZIP | MIAMI FL | |
| TITLE | V | <input type="checkbox"/> DELETE |
| NAME | DRIGGS, RAUL | |
| STREET ADDRESS | 11535 S.W. 77TH AVE. | |
| CITY-ST-ZIP | MIAMI FL | |
| TITLE | V | <input type="checkbox"/> DELETE |
| NAME | YATES, MURRAY S. | |
| STREET ADDRESS | 3588 COCOPLUM CIRCLE | |
| CITY-ST-ZIP | COCONUT CREEK FL | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|--------------------|--|
| 1.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | 8700 S.W. 124th Street |
| 1.4 CITY-ST-ZIP | Miami, FL 33176 |
| 2.1 TITLE | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME | V Cauley, Douglas F. |
| 2.3 STREET ADDRESS | Route 1 Box 170 |
| 2.4 CITY-ST-ZIP | Chipley, FL 32428 |
| 3.1 TITLE | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 3.2 NAME | V Meeds, Patrick |
| 3.3 STREET ADDRESS | 2740 Old Trail Dr |
| 3.4 CITY-ST-ZIP | West Palm Beach, FL 33417 |
| 4.1 TITLE | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 4.2 NAME | V Wages, William |
| 4.3 STREET ADDRESS | 2634 Fallbrokk Dr |
| 4.4 CITY-ST-ZIP | Oviedo, FL 32765 |
| 5.1 TITLE | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 5.2 NAME | V Waters, Wayne |
| 5.3 STREET ADDRESS | 736 Vassar Road |
| 5.4 CITY-ST-ZIP | Deland, FL 32724 |
| 6.1 TITLE | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 6.2 NAME | D Benitez, Silvia S. |
| 6.3 STREET ADDRESS | 14491 S.W. 161st Street |
| 6.4 CITY-ST-ZIP | Miami, FL 33177 |

14. I do 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 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: _____ **2/3/97 (305) 235-5098**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)