

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000004448

FILED  
Feb 07, 2012  
Secretary of State

Entity Name: METRIC HALO DISTRIBUTION, INC.

**Current Principal Place of Business:**

5 DONOVAN DRIVE  
HOPEWELL JCT, NY 12533

**New Principal Place of Business:**

306 10TH AVE N  
SAFETY HARBOR, FL 34695

**Current Mailing Address:**

5 DONOVAN DRIVE  
HOPEWELL JCT, NY 12533

**New Mailing Address:**

306 10TH AVE N  
SAFETY HARBOR, FL 34695

FEI Number: 14-1815294

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GOLDSTEIN, BRUCE S  
500 E KENNEDY BLVD STE 200  
TAMPA, FL 33602 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: BUCHALTER, JOSEPH  
Address: 306 10TH AVE N  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DV  
Name: BUCHALTER, STUART  
Address: 306 10TH AVE N  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D  
Name: BUCHALTER, BENJAMIN  
Address: 306 10TH AVE N  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: S  
Name: BUCHALTER, ILENE  
Address: 306 10TH AVE N  
City-St-Zip: SAFETY HARBOR, FL 34695

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH BUCHALTER

P

02/07/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date