2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000151388

10875 NW 33 ST

MIAMI, FL 33172

Address:

City-St-Zip:

Entity Name: METRICS FREIGHT SYSTEMS, INC

FILED May 06, 2005 Secretary of State

Entity Name: METRICS FREIGHT SYSTEMS, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
10875 NW 33 ST MIAMI, FL 33172			2335 NW 107 AVE 2M35 DORAL, FL 33174		
Current M	ailing Addres	s:	New Mailing Address	New Mailing Address:	
10875 NW MIAMI, FL			2335 NW 107 AVE 2M35 DORAL, FL 33174		
FEI Number:	20-1843413	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
SUEIRAS, ALBERT 10875 NW 33 ST MIAMI, FL 33172 US			SUEIRAS, ALBERT 9495 SUNSET DR. 230 MIAMI, FL 33173 US		
	named entity s of Florida.	submits this statement for the pr	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: ALBERT SUEIRAS				05/06/2005	
	Electron	ic Signature of Registered Age	nt	Date	
		3(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS	AND DIREC	TORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () MACALUSO, CA 10875 NW 33 S MIAMI, FL 331	т	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) SIERRA, MIGUE 4623 SW 140 F MIAMI, FL 331	LACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () VICTORIANO, J 10875 NW 33 S MIAMI, FL 331	т	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () MACALUSO, GU	Delete JSTAVO	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

SIGNATURE: GUSTAVO MACALUSO DIR 05/06/2005