

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 MAY -2 PM 4:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #P940000037199

1. Corporation Name
Metatena Investment, Inc.

Principal Place of Business Mailing Address
1314 Cape Coral Pkwy P.O. Box 68
Cape Coral, FL 33904 Cape Coral FL
33910

3. Date Incorporated or Qualified	3a. Date of Last Report
	1996
4. FEI Number	Applied For
65-0492262	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing	\$5.00 May Be Added to Fees
Trust Fund Contribution	☐
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 1314 Cape Coral Pkwy	26 P.O. Box 68
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 204	27
City & State	City & State
23 Cape Coral, Florida	28 Cape Coral, Florida
Zip	Zip
24 33904	29 33910
Country	Country
25 USA	30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Walter J. Reinhold
5265 Nauticus Drive
Cape Coral, FL 33904

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

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Haja Roemer - POS ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	5349 Metatena Ct.	1.2 NAME	
STREET ADDRESS	Cape Coral, FL 33904	1.3 STREET ADDRESS	300002167863--3
CITY-ST-ZIP		1.4 CITY-ST-ZIP	-05/06/97--01100--013
TITLE	VP- ☐ DELETE	2.1 TITLE	***165.00 ☐ ***165.00 on
NAME	Walter Reinhold	2.2 NAME	
STREET ADDRESS	5265 Nauticus Dr.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Cape Coral, FL 33904	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Walter J. Reinhold

4-30-97

941540-0279

CR2E034 (9/96)