

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000097828

Entity Name: META WAREHOUSE, INC.**Current Principal Place of Business:**2600 S DOUGLAS ROAD
PH 6
CORAL GABLES, FL 33134**Current Mailing Address:**2600 S DOUGLAS ROAD
PH 6
CORAL GABLES, FL 33134**FEI Number:** 61-1425667**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PADIAL, JOSE I
2600 DOUGLAS ROAD
PH 6
CORAL GABLES, FL 33134 US*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**Officer/Director Detail :**

Title	P
Name	VILA, VICTORINO B
Address	245 SE 1ST STREET STE 316
City-State-Zip:	MIAMI FL 33131

Title	S
Name	SOCORRO, ROBERTONO M
Address	245 SE 1ST STREET STE 316
City-State-Zip:	MIAMI FL 33131

Title	D
Name	GALLINDO, EDUARDO J
Address	245 SE 1ST STREET STE 316
City-State-Zip:	MIAMI FL 33131

Title	D
Name	MARQUES, RICARDO A
Address	245 SE 1ST STREET STE 316
City-State-Zip:	MIAMI FL 33131

Title	D
Name	PEGO, LUIS A
Address	245 SE 1ST STREET STE 316
City-State-Zip:	MIAMI FL 33131

Title	D
Name	ARAUJO, PAULO H
Address	245 SE 1ST STREET STE 316
City-State-Zip:	MIAMI FL 33131

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: VILA, VICTORINO B

P

02/05/2013

Electronic Signature of Signing Officer/Director Detail_____
Date