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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

2. Principal Place of Business

(4)

2a, Mailing Address

METRO SALES AND LEASING, INC.

Secretary of State

FILED

May 04 1998 8:00am

Principal Place of Business Mailing Address

12805 N. W. 42ND AVENUE 12805 N. W. 42ND AVENUE OPA LOCKA FL 33054 OPA LOCKA FL 33054

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified

06/03/1975

4. FEI Number

21	26				59-1596930	Not Applicab
	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State 23 28				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country Zip 25 29		Country 30		This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible Yes No
g, Name and Address of Current Registered Agent					10. Name and Address of New Register	ed Agent
ALTERMAN, JOHN C/O METRO SALES & LEASING, INC 12805 NW 42ND AVE				Name		
				82 Street Address (P.O. Box Number is Not Acceptable)		
				On Cot / Idai	obs (i.e. box rumber to troi recopiable)	
OPA LOCKA FL 33054						
			84	City		85 Zip Code
11. Pursuant to office or re	o the provisions of Sections 607.0502 agistered agent, or both, in the State	2 and 607 1508, Florida Statutes of Florida Such change was au	s, the above uthorized by	e-named corp the corporat	oration submits this statement for the purposion's board of directors. I hereby accept the	e of changing its registere
SIGNATURE						
12.	Signature, typed or printed name of registered ager OFFICERS AND		13.	int signature requir	ed when reinstaling) DAT ADDITIONS/CHANGES TO OFFICERS /	
TITLE	VSD	DELETE	1.1 TITLE	- 1	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	ALTERMAN, RICHARD		1.2 NAME	}		
STREET ADDRESS	12805 N.W. 42ND AVE.		1 3 STREET	ADDBESS	•	
CITY-ST-ZIP	OPA LOCKA FL 33054		1.4 CITY-S			
TITLE	D	DELETE	21 TITLE			Change Addition
NAME	ALTERMAN, SIDNEY	_	2.2 NAME			
STREET ADDRESS	12805 NW 42ND AVE		2.3 STREET	ADDRESS		
CITY-ST-ZIP	OPA LOCKA, FL 00000 33054		2 4 CITY-S	· · · · · · · ·		
TITLE	VTD	DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME	ALTERMAN, JOHN		3.2 NAME			
STREET ADDRESS	12805 NW 42ND AVE		3.3 STREET	ADDRESS		
CITY-ST-ZIP	OPA LOCKA, FL 00000 3305	54	3.4. CITY - S	iT-ZIP		
TITLE	PO	DELETE	4.1 TITLE			Change Addition
NAME	ROARK, VERNON		4. 2 NAME			
STREET ADDRESS	12805 NW 42ND AVE		4.3 STREET	ADDRESS		
CITY-ST-ZIP	OPA LOCKA, FL 00000 3305	54	4.4 CITY-S	T-21P		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
0074 67 310			6.4.60704.60	7 70		

14. I 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 coreiver 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.

Applied For