2007 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT #500880** 01-16-2007 90188 042 ***150.00 METRO SPECIALTY SERVICES CORPORATION Principal Place of Business Mailing Address POST OFFICE BOX 985 1972 HILLVIEW ST SARASOTA, FL 34230-0985 US SARASOTA, FL 34239 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 1972 Hillview Street Suite, Apt. #, etc. Suite, Apt. #, etc. 01102007 CR2E034 (12/06) 4. FEI Number City & State City & State Applied For Sarasota, FL 59-1661665 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 34239 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name James <u>C. Huber</u> HUBER, MARK J Street Address (P.O. Box Number is Not Acceptable) 1972 Hillview Street 1972 HILLVIEW STREET SARASOTA, FL 34230-0985 City Zip Code Sarasota 8. 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. I am familiar with, and accept the obligations of registered agent. <u>James C. Huber, VP</u> 1-11-07 SIGNATURE (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition HUBER, MARK J NAME NAME STREET ADDRESS 3421 BAYOU CT. STREET ADDRESS LONGBOAT KEY, FL 34228 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition HUBER, JOYCE W NAME NAME STREET ADDRESS 2120 HARBORSIDE DRIVE STREET ADORESS CITY-ST-ZIP LONGBOAT KEY, FL 34228 CITY-ST-ZIP ШE VTD D Octete TITLE Change ☐ Addition HUBER, JAMES C NAME NAME STREET ADDRESS 2120 HARBORSIDE DRIVE STREET ADDRESS CITY-ST-ZIP LONGBOAT KEY, FL 34228 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition HUBER, PAUL C NAME NAME STREET ADDRESS 226 LAKE SUMMERSET DR. STREET ADDRESS CITY-ST-ZIP **DAVIS, IL 61019** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ITILE Delete TITLE ☐ Change ☐ Addition: NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all glippr like empowered.

James C. Huber

1-11-07

941/366-8300

mes

NATURE AND TYPED OR PRINTED NAME OF SIG

SIGNATURE:

FILED Jan 16, 2007 8:00 am