


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # 567464 1. Entity Name. METRO MACHINE COMPANY, INC.	
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Principal Place of Business 7886 N W 64TH STREET MIAMI, FL 33166	Mailing Address 7886 N W 64TH STREET MIAMI, FL 33166
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03192008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1812535	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

FULTZ, BENNETT D
619 SW 12TH AVE
MIAMI, FL 33130

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000860355 04/02/08-80061-001 150.00
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10. OFFICERS AND DIRECTORS

TITLE	VS
NAME	MOLINA, ARMANDO
STREET ADDRESS	9075 SOUTHERN ORCHARD ROAD SOUTH
CITY-ST-ZIP	DAVIE, FL
TITLE	PT
NAME	SALAZAR, FRANCISCO
STREET ADDRESS	11986 SW 55TH STREET
CITY-ST-ZIP	COOPER CITY, FL 33330
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing 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 other like empowered.

SIGNATURE:  03/19/08 (305) 591-4498

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #