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

DOCUMENT # 680069

(2)

METRO JITNEY INCORPORATED

FILED May 07 1997 8:00am Secretary of State



Principal Place of Business Mailing Address						.c 91981 01941 01941 01911 61611	. 01911 1991
1985 NE 142N MIAMI FL 3318		1995 NE 142ND ST Miami FL 33181-1505					
					3. Date Incorporated or Qualified 07/28/1980	3a. Date of Last F 04/26/1996	leport
	lace of Business	2e. Mailing Address			4. FET Number	A	pplied For
21		26			65-0447374	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	ot Applicable
Suite, Apl.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional equired
City & State		City & State	· ₁		6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Countr	у	8. This corporation has liability for	intangible tax under s	3. 199.032,
24	25	[29]	30]		·	Yos No	
	9, Name and Address of Curre	ent Registered Agent		Name	10. Name and Address of New Ro	gistered Agent	
ZILBER, SIGMUND				81 Name			
1995 NE 142 ST. NO. MIAMI FL 33181			82	82 Street Address (P.O. Box Number is Not Acceptable)		ble)	
110.	madii / E oo to t		83				
			84	City		—∎ 85 Zip	Code
· 				l′	rporation submits this statement for the		
agent. I a	egistered aggint, or noin, in the state in familiar with, and accept the obli- Signature, typed or printed name of registered a	gations of, Section 607.0505, Fl	lorida Statute	is.	ation's board of directors. Thereby acce	part	registered
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	RS IN 12
TITLE	D\$P	☐ DELETE	15 100		T	Change Change	Addition
NAME	ZILBER, SIGMUND		1.2 NAME				
STREET ADDRESS	1995 NE 142 ST. NO. MIAMI FL			1 ADDRESS			
CITY-ST-ZIP TITLE	NO. MIXWI FL	DELETE	2.1 UHE		>	Charige	Addition
NAME			2.2 NAME	'n	nartin Zilber	□ ourage	N. Control
STREET ADDRESS			1	LADDRESS 1	995 NE 142 St		
CITY-ST-ZIP			2 4 Crty	SI ZIP	V.MIAMI FL 3318	l	
TITLE		DITETE	3 1 11111	· · ·	•	Change	Addit.on
NAME			3.2 NAME	Ê	dupard Steinberg		-
STREET ADDRESS			3 3 STREE	1 ADDRESS 1	995 NE 146 5.		
CITY-ST-ZIP			3.4. CHY	<u> 51 - 209 P</u>	J. Miami, FL 33181		
TITLE		☐ DELFTE	4.1 7/11/	}		L_J Change	Addition
NAME REPORT ADDRESS			4. 2 NAM				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CHY- 5 1 THUE	51-71		Change	Addition
NAME			5.2 NAME			<u></u>	in a summer
STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP			5.4 CHY-				
TITLE		DECETE	6.1 TITLE			Change	Addition
NAME			G 2 NAME				į
STREET ADDRESS			6.3 \$1REE	T ADDRESS			
CITY-ST-ZIP			6.4 CHY-	\$1 - 7IP			
44 1	and the second second	1 1 1 1 1 1 1			1. 6 1. 446 (23/6)(0) 5		

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 early 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 a distinct.