2007 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 12, 2007 8:00 am **Secretary of State** DOCUMENT # F06000001805 02-12-2007 90092 035 ***150.00 1. Entity Name **GENERAL METERS CORPORATION** Principal Place of Business Mailing Address VIIITADAO 1935 DOMINION WAY #202 1935 DOMINION WAY #202 COLORADO SPRINGS, CO 80918 COLORADO SPRINGS, CO 80918 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 95-3387633 Not Applicable Zin Country 7in Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GOTTLIEB, LEON S Street Address (P.O. Box Number is Not Acceptable) 1153 EDGEWATER CIRCLE BRADENTON, FL 34209 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent tignature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DVP TITLE Delete TITLE matthew Dales ROSEBERRY FRANK NAME NAME 1935 Dominian Way STREET ADDRESS 1935 DOMINION WAY #202 STREET ADDRESS CITY-ST-ZIP COLORADO SPRINGS, CO 80918 CITY-ST-ZIP TITLE Delete TITLE ☐ Addition NAME GOTTLIEB, LEON S NAME STREET ADDRESS 1153 EDGEWATER CIRCLE STREET ADDRESS BRADENTON, FL 34209 CITY-ST-7IP CITY-ST-ZIP VP TITLE ☐ Delete TITLE ☐ Change ■ Addition ZANDER, JEFF NAME STREET ADDRESS 4701 PETIT AVE STREET ADDRESS CITY-ST-ZIP ENCINO, CA 91436 CITY-ST-ZIP TITLE ☐ Delete □ Change ☐ Addition NAME STANECEK, DANA NAME 1935 DOMINION WAY #202 STREET ADDRESS STREET ADDRESS COLORADO SPRINGS, CO 80918 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete □ Change ■ Addition NAME NAME

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.

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

☐ Change

☐ Addition

FILED