

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005573

FILED
Jan 07, 2008
Secretary of State

Entity Name: METRO/REPUBLIC COMMERCIAL SERVICE, INC.

Current Principal Place of Business:

320 BONNIE CIRCLE
CORONA, CA 928806974

New Principal Place of Business:

320 BONNIE CIRCLE
CORONA, CA 928806974 US

Current Mailing Address:

320 BONNIE CIRCLE
CORONA, CA 928806974

New Mailing Address:

FEI Number: 95-2483608 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WEEKS, GEORGE
141 KINGSTON AVENUE
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPVS () Delete
Name: CHRISTIAN, BRUCE C
Address: 2 CASTILLO DEL MAR
City-St-Zip: CAPISTRANO BEACH, CA 92624

Title: T () Delete
Name: CHRISTIAN, BRUCE C
Address: 2 CASTILLO DEL MAR
City-St-Zip: CAPISTRANO BEACH, CA 92624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GINA LESTELLE MONDELLO

CFO

01/07/2008

Electronic Signature of Signing Officer or Director

_____ Date