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PRÓFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F94000002556

1. Corporation Name METRO IRB. INC.

FILED Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90070 014 ***150.00

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Principal Place	e of Business	Mailing	Address				}	11031103 1110 10111 010	(() •••••			
520 BROAD STREET		520 BROAD STREET										
NEWARK NJ 07102		NEWARK NJ 07102						DO NOT WRITE IN THIS SPACE				
							-	Date Incorporated or (1110 017		
								05/17/1994			.	
2. Principal Pl	ace of Business	2a. Mail	ing Address					FEI Number			 	olied For
21		26						22-3282834				Applicable
Suite, Apt.	#, etc.	Suit	e, Apt. #, etc.				5.	Certificate of Status De	esired	\$	8.75 A Fee Re	
22		27								·····		
City & State		City & State				6.	Election Campaign Fir			\$ 5.00 Added to		
23		28		Coun	to:		-	Trust Fund Contribution	_			o rees
Zip	Country	Zip	r		Lr y		8.	This corporation owes Personal Property Tax	=		Yes	X No
24	9. Name and Address of Curren	29		30			10	Name and Address				
	9. Name and Address of Curre	nt Registered	Agent		81 I	Name	10.	Name and Address (or mon magner		<u></u>	
СТ	CORPORATION SYSTEM											
	EXECUTIVE CEENTER DRIVE			+	82 5	Street A	ddress (P	O. Box Number is Not	t Acceptable)			
	E 200) ,	83	_						
	AHASSEE FL 32301											
				[84 (City		_		FL 8	5 Zip C	Code
44 8	to the provisions of Sections 607.050	02 and 607 16	OR Elorida Statute	s the ah	0/9-0	named c	ornoration	submits this statemen	nt for the purpo	se of cha	naina its	registered
l office or r	egistered agent, or both, in the State	of Florida. St	uch change was au	Ithorized	Dy the	e corpor	ration's bo	pard of directors. I here	by accept the	appointme	ent as req	gistered
agent. I a	m familiar with, and accept the obliga	ations of, Sect	tion 607.0505, Flor	ida Statu	les.							
SIGNATURE			(NOTE:	Pegistered 6	laont sì	ianeture rec	nuired when r	einstatino)	DA	Œ		
	Signature, typed or printed name of registered age				lgent si	ignature rec	quired when r			RS AND D	IRECTO	RS IN 12
12.	OFFICERS AN			Registered A		ignature rec		einstating) ADDITIONS/CHANGES		RS AND D	IRECTO	RS IN 12
12.	OFFICERS AN		RS	13.	.E	ignature rec				RS AND D		
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14. I 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 oath; that I am an officer or director of the corporation or the redeiver 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 audicumpation with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR V. P. C. Secretary