

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 24, 2004 8:00 am
Secretary of State

02-24-2004 90018 042 ****61.25

DOCUMENT # F99000004966

1. Entity Name

METROVISION International, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

202 Norfolk Place

Suite, Apt. #, etc.

3. Mailing Address

8825 Boggy Creek Rd

Suite, Apt. #, etc.

City & State

Celebration, FL

City & State

Orlando, FL

Zip

34747

Country

Zip

32824

Country

4. FEI Number

31-1438160

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

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94019559

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent.

Name

MERZ, William J.

Street Address (P.O. Box Number is Not Acceptable)

202 Norfolk Place

City

Celebration

FL

Zip Code

34747

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$61.25
Initial or Amended UBR**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Goad, Timothy L.
8825 Boggy Creek Rd.
Orlando, FL 32824**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
HOFFMAN, GEORGE M.
1176 SCARLET COURT
WESTERVILLE, OH 43081**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TV
GOAD-PANKALLA, CAROLYN S.
8825 BOGGY CREEK RD.
ORLANDO, FL 32824**

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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12. 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 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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with or without like empowered.

SIGNATURE:

Timothy L. Goad

2/18/04

(407) 472-7000

CR2E037B (12/02)