

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J09164

Entity Name: META-SCIENCE, INC.

FILED
Jan 22, 2009
Secretary of State

Current Principal Place of Business:

% RONALD BOENDER
3431 NE 17TH TERRACE
FT LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

% RONALD BOENDER
3431 NE 17TH TERRACE
FT LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 59-2666586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOENDER, RONALD
3431 NE 17TH TERRACE
FT LAUDERDALE, FL 33334 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: DP () Delete
Name: BOENDER, RONALD,
Address: 3431 NE 17TH TERRACE
City-St-Zip: FT LAUDERDALE, FL 33334

Title: VP () Delete
Name: GRACE, BOENDER
Address: 3431 NE 17TH TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33334

Title: S () Delete
Name: MARY JANE, VANDEN BERGE
Address: 4020 NE 17TH TERRACE
City-St-Zip: OAKLAND PARK, FL 33334

Title: T () Delete
Name: ANNA, ZINNO
Address: 192 PAULANNA AVENUE
City-St-Zip: BAYPORT, NY 11705

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JENNIFER RUTHERFORD

MRS.

01/22/2009

Electronic Signature of Signing Officer or Director

_____ Date