2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

J80720

1. Entity Name

METRO WATCH CO., INC.



FILED Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90186 010 ***150.00

						100 M								
Principal Place of Business 36 NE 1ST STREET SUITE 223 MIAMI FL 33132 US			36 N Suiti	Mailing Address 36 NE 1ST STREET SUITE 223 MIAMI FL 33132										
2. Principal P	lace of Busin	ess		3. Mailing Address									II BIANI IODI	
Suite, Apt.	#, etc.		Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES						
City & State	e		City	City & State				4. FEI Number 65-0005722				Applied For Not Applicable		
Zip Country			Zip	Zip Cou			5. Certificate of Status Desired			a 🗆	\$8.75 Additional Fee Required			
	6. Name	and Address of Cu	rrent Registere	d Agent			7. N	lame and A	dress of Nev	v Registere	ed Agent			
						Name								
SYNA, SIDNEY L. 28 W. FLAGLER ST.				Street Address			ess (P.O. Bo	(P.O. Box Number is Not Acceptable)						
SUITE 61	0	ė,											1	
MIAMI FL							City'				Zip Code			
8. The above obligat	named entity ions of regist	submits this statemered agent.	ent for the purpo	ose of changing its	registere	ed office or reg	istered age	ent, or both,	n the State of	Florida. I a	am familiar w	ith, ar	nd accept	
SIGNATURE .	Signature, typed	or printed name of registere	d agent and title if appl	ficable. (NOTS	E: Registere	d Agent signature re	quired when rei	instating)		DAT	Ē			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State									on Campaign Fund Contribu	_			May Be Fees	
10.		OFFICERS	AND DIRECTOR	RS	11.		AD	DITIONS/CH	ANGES TO C	FFICERS A	AND DIRECT	ORS I	N 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LANDAU, 36 NE 18 MIAMI FL	T STREET	-	☐ Delete							☐ Chanç)e	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete					· · · · · · · · · · · · · · · · · · ·		☐ Chan	ge	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	•		<u>-</u>				☐ Chan	je	Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Chanç	je	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	•					•	☐ Chang	je	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Chang	je	Addition	

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 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.

SIGNATURE:

Samatyer Bequires ar a SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan-30=2003

Date

Daytime Phone #