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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Feb 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

(5)DOCUMENT # **L38149** METRO PARKING, INC. Principal Place of Business Mailing Address **% RODNEY BARRETO** PO BOX 161469 MIAMI FL 33116-1469 MIAMI FL 33176 3a. Date of Last Report 3. Date Incorporated or Qualified 12/26/1989 02/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0164485 26 Not Applicable 21 Suite, Apt. #, etc. Suite Apt. #. etc \$8.75 Additional 5. . Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Bi Name BARRETO, RODNEY 9250 SW 104TH ST 82 Street Address (P.O. Box Number is Not Acceptable) MIAM! FL 33176 83 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent for both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent if am farmfar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, speed or printed name of regionarial agent and lefe if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13, DELETE __ Change Addition 1.1 TITLE TIFLE BARRETO, RODNEY 1.2 NAME CR2E034 NAME 9250 SW 104TH ST STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 21 TITLE NAVE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-\$T-ZIP CITY - \$1 - 7IF DELETE Change Addition THILE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CHTY - SIT - ZiF DELETE Change Addition THEF 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADORESS STREEL ATIONESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Addition 1:111 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5 4 CITY-ST-ZIP CHY-SI-ZP DELETE ☐ Addition 6 1 TITLE Table NAME 6.2 NAME 63 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZIP CITY-S1-ZiP of qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the port is true and accurate and that my signature shall have the same legal effect as if made under oath; that expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name 14. I do hereby certify that the d with this fil ig does information indicated on this Lam an officer or director of supotementa innual re