2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L82073

Entity Name: METROPOLITAN PAYROLL CORP.

FILED Jan 16, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

1701 NW 31 AVENUE FT. LAUDERDALE, FL 33311

Current Mailing Address: New Mailing Address:

1701 NW 31 AVENUE FT. LAUDERDALE, FL 33311

FEI Number: 65-0231479 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEIBOV, SANDY
7547 BLACK OLIVE WAY
TAMARAC, FL 33321 US
LEIBOV, SANDY
7547 BLACK OLIVE WAY
TAMARAC, FL 33321 US
TAMARAC, FL 33321 US

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: SANDY LEIBOV 01/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DPS
 () Delete
 Title:
 DPS
 (X) Change () Addition

 Name:
 LEIBOV, BERNARD M.,
 Name:
 LEIBOV, BERNARD M

 Address:
 7547 BLACK OLIVE WAY
 Address:
 7547 BLACK OLIVE WAY

 City-St-Zip:
 TAMARAC, FL
 City-St-Zip:
 TAMARAC, FL
 33321

Title: DT () Delete Title: DT (X) Change () Addition Name: LEIBOV, SANDY, Name: LEIBOV, SANDY

Address: 7547 BLACK OLIVE Address: 7547 BLACK OLIVE WAY City-St-Zip: TAMARACK, FL City-St-Zip: TAMARAC, FL 33321

Title: D () Delete Title: () Change () Addition

 Name:
 SCHULTZ, STEVEN
 Name:

 Address:
 4818 NW 117 AVE
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33076
 City-St-Zip:

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 LEIBOV, HOWARD

 Address:
 Address:
 9050 NW 49TH PLACE

 City-St-Zip:
 City-St-Zip:
 CORAL SPRINGS, FL 33067

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: HOWARD LEIBOV D 01/16/2009