

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
May 19, 2009  
Secretary of State**

DOCUMENT# N00000008456

Entity Name: META CENTER INC.

**Current Principal Place of Business:**9001 HUNTINGTON POINTE DR  
SARASOTA, FL 34238**New Principal Place of Business:****Current Mailing Address:**9001 HUNTINGTON POINTE DR  
SARASOTA, FL 34238**New Mailing Address:**

FEI Number: 65-1065355

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**CUEVAS-NEUNDER, ELIZABETH  
9001 HUNTINGTON POINTE DR  
SARASOTA, FL 34238 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

**OFFICERS AND DIRECTORS:**Title: CEO ( ) Delete  
Name: CUEVAS-NEUNDER, ELIZABETH  
Address: 9001 HUNTINGTON POINTE DR.  
City-St-Zip: SARASOTA, FL 34238Title: DT ( ) Delete  
Name: DIAZ, LIZA  
Address: 9001 HUNTINGTON POINTE DR.  
City-St-Zip: SARASOTA, FL 34238Title: D ( ) Delete  
Name: MENDEZ, LARRY  
Address: 9001 HUNTINGTON POINTE DR  
City-St-Zip: SARASOTA, FL 34238Title: D ( ) Delete  
Name: SANTIGAO, EDGARD  
Address: 9001 HUNTINGTON POINTE DR.  
City-St-Zip: SARASOTA, FL 34238Title: D (X) Delete  
Name: ARCE, DENNIS  
Address: 9001 HUNTINGTON POINTE DR.  
City-St-Zip: SARASOTA, FL 34238**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: D (X) Change ( ) Addition  
Name: NEUNDER, JOSEPH M DR.  
Address: 9001 HUNTINGTON POINTE DR.  
City-St-Zip: SARASOTA, FL 34238Title: D (X) Change ( ) Addition  
Name: ARCE, DENNIS R MR.  
Address: 9001 HUNTINGTON POINTE DR  
City-St-Zip: SARASOTA, FL 34238Title: D (X) Change ( ) Addition  
Name: SANTIAGO, EDGARD  
Address: 9001 HUNTINGTON POINTE DR.  
City-St-Zip: SARASOTA, FL 34238Title: ( ) 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH CUEVAS-NEUNDER

CEO

05/19/2009

Electronic Signature of Signing Officer or Director

Date