

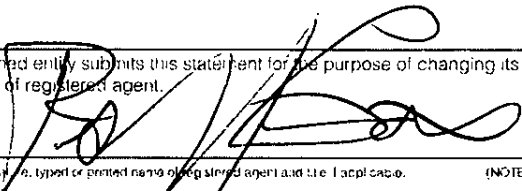
2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # N38340			
1. Entity Name METROCHURCH, INC.			
Principal Place of Business 29834 N. CAVE CREEK RD. SUITE 118-230 CAVE CREEK AZ 85331 US		Mailing Address 29834 N. CAVE CREEK RD. SUITE 118-230 CAVE CREEK AZ 85331 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

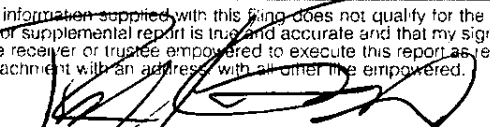


1st MOORE CR2E037 (10/07)

6. Name and Address of Current Registered Agent RALPH DIAZ GERARD 3801 CRYSTAL LAKE DRIVE POMPANO BCH. FL 33064		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Signature, typed or printed name of registered agent and the applicable. (NOTE: Registered Agent signature required when reappointing) DATE Mar 10, 2008			
FILE NOW: FEE IS \$61.25 Due By May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RALPH DIAZ GERARD 29834 N. CAVE CREEK RD. #118-230 CAVE CREEK AZ 85331 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	U00000898367 04/25/08-80086-003 70.00 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GERARD, JOANNA 29834 V. CAVE CREEK RD. #118-230 CAVE CREEK AZ 85331 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIAZ, BLANCA 415 SW 4TH AVE BOYNTON BEACH FL 33435 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 617, 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 the empowered.

SIGNATURE:  **Mar 10, 2008**