2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2004 08:00 AM Secretary of State

* ANNUAL REFURI						Secretary of State			
DOCUMENT # P0100040186 1. Entity Name METRO DELIVERY SERVICES, INC.						56	cretary or	State	
Principal Place of Business Mailing Address				- 	1				
13251 SW 17TH LANE		13251 SW 17TH LANE							
APT 7		APT 7							
MIAMI, FL 33175-7608		MIAMI, FL 33175-7608							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt #, etc.		Suite, Apr. #, etc.		01152004	Chg-P	CR2E034 (10/03)			
City & State		City & State		4. FEI Numb 65-109			plied For of Applicable		
Zip	Country	Zip	Zip Coun!		5. Certificate	of Status Desired	S8.75 Add Fee Require		
	6. Name and Address of Current			7. Name and Address of New Registered Agent					
ICI ECIAC	ADOLEO E			Name					
	, ADOLFO E V. 128TH STREET 33186		Street Address		(P.O. Box Number is Not Acceptable)				
,,	55,00								
				City 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.									
DIGULATI. PE									
SIGNATURE Signature, typed or printed name of registered agent and life it applicable. (NOTE Registered agent signature required when refreshing) DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 * Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	/CHANGES TO OF	FICERS AND DIRECTOR	SINTI	
TITLE	— - · · · · · · · · · · · · · · · · · ·		TITLE	ı			☐ Change	☐ Addition	
NAVE			MAME			000000	149472 80187-018 150	no.	
STREET ADDRESS City-ST-1/P	13251 SW 17TH LANE APT. 7 MIAMI, FL 331757608		STREET ADGRESS GRY+ST+ZIP			05/03/04-	80184-N18 ran	.UU	
			-						
TITLE HAME			TITLE	1			☐ Change	☐ Addition	
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP	·			81.13					
TITLE		☐ Celete	TITLE	3			☐ Change	Addition	
NAME CTOCCI ADDATOR			NAME	3					
STREET ADDRESS CITY - ST - ZIP				ELADDRESS ST-2IP					
TITLE	☐ Delote Ti		TITLE				☐ Change	Addition	
NAME			NAME	:					
STREET ADDRESS	3 ■			T ADDRESS.					
City- St-2iP			ST-ZIP		· · · · · · · · · · · · · · · · · · ·		(T) Addres		
TITLE NAME			TETLE NAME	- 1			☐ Change	☐ Addition	
STREET ADDRESS	ADDRESS		8	T ADDRESS				_	
CITY-ST-ZIP	- I		4	ST-ZIP					
TITLE		☐ Delete	TITLE				☐ Change	Addition	
MAME			NAVE	- 1					
STREET ADDRESS CAY-57-ZIP				T ADERESS St. 7/F					
City-57-2P City-57-2P 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in 5 indicated on this record or supplied with this filing does not qualify for the exemption stated in 5 indicated on this record or supplied specific type and accurate and that are signature shall be an in-						El Florida Ctalulan	I further entitle that the	iomation	
	voi ary a sac a sa a morrisament suppliesed With	was mary some not drighty for	אם סיגו	Charte grange IL 9	meson: 115 Dild	on indica diamete	THE REPORT OF THE PROPERTY OF	united fills	

Thereby definy into the information supposed with this thing dose not quality for the exemption stated in Section 1.19 07(3)(1), honors stated in California indicated on this report or supplemental report is true and accurate and that my signature shall have the same legisl effect as if made under orabit; that I arm 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: SIGNATURE AND TYPED ON PRINTED HAME OF SIGNING OFFICER OF

4.29.04

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