2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 05, 2005 08:00 AM Secretary of State

Daytime Phone #

DOCUMENT # P0100090186 1. Entity Name METRO CARE MEDIA, INC. Principal Place of Business P. 0. BOX 812679 BOCA RATON, FL 33481 Mailing Address P. 0, BOX 812679 BOCA RATON, FL 33481				Secretary of State		
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				06302005 4. FEI Numb 65-114		
GLADSTONE, ARLINE 1550 N. FEDERAL HWY. DELRAY BCH, FL 33483			DO NOT WRITE IN THIS SPACE			
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 lyped or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE						
FILE NOWILL FEE IS \$150.00 Due by September 7, 2005 9. Election Campaign Finan Trust Fund Contribution.			sing \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10.	OFFICERS AND DIE	RECTORS		per a NA PE CO.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST GLADSTONE, ARLINE P.O. BOX 812679 BOCA RATON, FL 33481				U00000370524 07/05/05-80016-019 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ME REET ADDRESS			IN THIS SPACE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					-	
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 of the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my page appears in Block 10 or Block 11 if						