

AMENDMENT 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000027489

1. Entity Name

METROPOLITAN REALTY & INVESTMENTS, INC.

Principal Place of Business

103 W. Bay Harbor Dr., #3-E
Bay Harbor, Fl. 10350

Mailing Address

6940 Seagrape Terrace
Miami Lakes, Fl. 33014

2. Principal Place of Business

3. Mailing Address

State, Apt. # etc.

State, Apt. # etc.

City & State

City & State

Zip

Country

Zip

Country

100022481324
08/21/03--01052--020 **61.25

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-4491347

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FERNANDEZ, RUBEN
10350 W. BAY HARBOR DR., #3-E
BAY HARBOUR, FL. 10350

Name
ITURROSPE, MATIAS
Street Address (P.O. Box Number is Not Acceptable):
6940 Seagrape Terrace
City
Miami Lakes FL 33014

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.

SIGNATURE

MATIAS ITURROSPE

(NOTE: Registered Agent signature required when registering)

DATE

8/8/03

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP
FERNANDEZ, RUBEN
10350 W. Bay Harbor Dr., #3-E
Bay Harbor, Fl 10350

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP
MORANA, FRED
10350 W. Bay Harbor Dr., #3-E
Bay Harbor, Fl. 10350

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP
D ITURROSPE, OSVALDO
10350 W. Bay Harbor Dr., #3-E
Bay Harbor, Fl. 10350

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP
D/P/T/S
ITURROSPE, MATIAS
6940 Seagrape Terrace
Miami Lakes, Fl. 33014

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

MATIAS ITURROSPE, President

08-08-03

305-4582455

TOTAL FEE