

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90333 031 ***150.00

DOCUMENT # P03000012105

1. Entity Name
METELINE TECH INC.



Principal Place of Business
**360 BAYSHORE BLVD. N. #208
CLEARWATER, FL 33759**

Mailing Address
**360 BAYSHORE BLVD. N. #208
CLEARWATER, FL 33759**

14014749



2. Principal Place of Business
2861 Executive Dr.

Suite, Apt. #, etc.
Suite 200

City & State
Clearwater FL

Zip
33762

Country

3. Mailing Address
2861 Executive Dr.

Suite, Apt. #, etc.
Suite 200

City & State
Clearwater FL

Zip
33762

Country

04292004 Chg-P CR2E034 (10/03)

4. FEI Number
59-3764857

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**PAPPAS, GEORGE N
360 BAYSHORE BLVD. N. #208
CLEARWATER, FL 33759**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **PAPPAS, GEORGE N**
STREET ADDRESS **360 BAYSHORE BLVD. N. #208**
CITY-ST-ZIP **CLEARWATER, FL 33759**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President - Director** ☒ Change ☐ Addition
NAME **George Pappas**
STREET ADDRESS **360 Bayshore Blvd N. #208**
CITY-ST-ZIP **Clearwater, FL 33759**

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George N Pappas 4/29/04 727-489-1438

Date

Daytime Phone #