
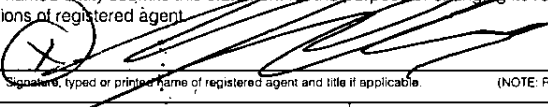
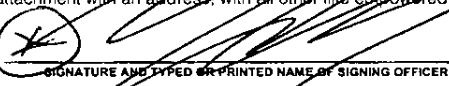


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2007 8:00 am
Secretary of State

01-23-2007 90040 032 ***158.75

DOCUMENT # P03000099969 1. Entity Name METROPOLITAN BROKERS INC.																																			
Principal Place of Business 15885 S.W. 246 STREET MIAMI, FL 33031 US		Mailing Address P.O. BOX 452306 MIAMI, FL 33245																																	
2. Principal Place of Business - No P.O. Box # 2011 SW 8th St Suite, Apt. #, etc.		3. Mailing Address 2901 SW 2nd Ave Suite, Apt. #, etc.																																	
City & State Miami FL Zip 33135		City & State Miami FL Zip 33129																																	
Country USA		Country USA																																	
4. FEI Number 20-0226736		Applied For <input type="checkbox"/> Not Applicable																																	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required																																	
6. Name and Address of Current Registered Agent MAZZOTA, MELISSA 1724 SW 22 TERRACE MIAMI, FL 33145		7. Name and Address of New Registered Agent Name MAZZOTA, MELISSA Street Address (P.O. Box Number is Not Acceptable) 2901 SW 2nd Ave City Miami FL Zip Code 33129																																	
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  (NOTE: Registered Agent signature required when reinstating) DATE 1-10-07																																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:50%;">PSD MAZZOTA, MELISSA 6815 SW 80TH ST MIAMI, FL 33143 <input type="checkbox"/> Delete</td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD MAZZOTA, MELISSA 6815 SW 80TH ST MIAMI, FL 33143 <input type="checkbox"/> Delete															11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:50%;">Pres Sec, Director MAZZOTA, MELISSA 2901 SW 2nd Ave MIAMI, FLA 33129 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres Sec, Director MAZZOTA, MELISSA 2901 SW 2nd Ave MIAMI, FLA 33129 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition														
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 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 		Date 1-10-07 Daytime Phone # 305-786-666-3876																																	