2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 22, 2004 8:00 am Secretary of State

DOCUMENT # P03000124539 1. Entity Name METRO BUILDERS OF ORLANDO INC.						06-22-200)4 90001 045 ***	150.00
Principal Place of Business 3006 IVEL DR ORLANDO, FL 32806		Mailing Address 3006 IVEL DR ORLANDO, FL 32806			1 10 0 13 0 0 1 3 1	IVII MAIII MAIII MAIII		8356
Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		06082004	Chg-P	CR2E034 (10/03)	
City & State City & State			1 4. FEI Number	33-1076	0/68 Ap	plied For t Applicable		
Zip	Country	Zip	Coun	try		of Status Desired	S8.75 Add Fee Require	
	6. Name and Address of Curre	nt Registered Agent			7. Name and	Address of New Re	egistered Agent	
REED, BERL 3006 IVEL DR				Name Street Addres	t Address (P.O. Box Number is Not Acceptable)			
ORLANDO	, FL 32806							
	*			City			FL Zip Cod	e , ,
	named entity submits this statementions of registered agent.	t for the purpose of changing i	ts register	ed office or regis	stered agent, or bo	th, in the State of Flo	rida. I am familiar with,	and accept
SIGNATURE_	Signature, typed or printed name of registered as	ent and title if applicable. (NC	OTE: Registere	bd Agent signalure requ	uired when reinstating)		DATE	<u> </u>
FILE NOW!!! FEE IS \$150.00 - 9. Election Campaign Financing \$5.00 May Be - Due by September 8, 2004 - Trust Fund Contribution. Added to Fees - Corporation did not receive the prior notice.							F.S.,.the notice.	
10.	OFFICERS A	ND DIRECTORS	11.		ADDITIONS	CHANGES TO OFFI	CERS AND DIRECTOR	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP REED, BERL CEO 3006 IVEL DR ORLANDO, FL 32806	☐ Delete					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	°6.	☐ Delete				****	☐ Change	Addition
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TITLE NAME STREET ADDRESS CITY-SI-ZIP	5 6 4 4 8	☐ Delete				,	☐ Change	Addition

12. I hereby certify that the information supplied with this filling 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: BURL Red BER Reed 6/14/04 407 859 987/

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☑ After May 1st of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received.

331076168

FEI Number Status	C Applied For C Not Applicable Current
Certificate of Status De	sired C Yes © No
Pr	incipal Place of Business
Address	3006 IVEL DR
Suite, Apt. #, etc.	
City, State	ORLANDO , FL
Zip Code & Country	32806
,	Mailing Address
Address	3006 IVEL DR
Suite, Apt. #, etc.	
City, State	ORLANDO , FL
Zip Code & Country	32806
Name A	nd Address of Registered Agent
Name (Last, First, Middle, Title	REED BERL ,
-or- RA Business Name	
Address	3006 IVEL DR
Suite, Apt. #, etc.	
City, State	ORLANDO , FL
Zip Code & Country	32806

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a

FEI Number

Attenhounds

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business entity, an individual must sign on their behalf. A business entity cannot serve as its

own RA.

PBO00124539

Registered Agent Signature

Continue Reset

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Business Entity Name

METRO BUILDERS OF ORLANDO INC.

Election Campaign Financing Trust Fund Contribution C Yes © No

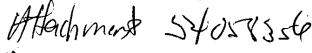
Officer/Director Name And Address

· Title	DP .
Name (Last, First, Middle, Title)	REED BERL CEO
-or- Entity Name	
Street Address	3006 IVEL DR
City, State	ORLANDO , FL
Zip Code & Country	32806
Title	
Name (Last, First, Middle, Title)	
-or- Entity Name	The second state of the se
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Zip Code & Country	- + P030	00 64331
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-or- Entity Name	Posturante and the second seco	and the state of t
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City, State		
Zip Code & Country		
An individual named a	s/Directors • No additional Officers/Directors who we must type their name in the ature block below. A corporate name is not	ectors to list
allowed in this block.	attire block below. A corporate frame is not	,
Title	DP	•
Officer/Director Signa	ature Berl Reed .	
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	s Start-Over, 6	·

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Receipt

Your data entry is complete. This is your receipt page. Please print and retain this page for your records.

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