## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

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Apr 23, 2004 8:00 a Secretary of State
04-23-2004 90201 009 ***150.00

DOCUMENT # P03000139654 METRO WEST INVESTMENT GROUP INC. Principal Place of Business Mailing Address 94062929 6536 FAIRWAY HILL COURT 717 EAST OAK STREET KISSIMMEE, FL 34744 ORLANDO, FL 32835 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04082004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 20-0421671 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HERSHBERGER, MARK W Street Address (P.O. Box Number is Not Acceptable) 6536 FAIRWAY HILL COURT ORLANDO,, FL 32835 & City 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, typed or printed name of registered regent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 **\$5.00** May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE Addition ☐ Change NAME HERSHBERGER, MARK W NAME 6536 FAIRWAY HILL COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32835 CITY-ST-ZIP VSD TITLE ☐ Delete TITLE Addition VALERO, JOSE NAME NAME STREET ADDRESS 4532 Raintree Ridge Road STREET ADDRESS 6536 FAIRWAY HILL COURT ORLANDO, FL 32835 CITY-ST-ZIP Orlando, FL 32837 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CiTY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS 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.