


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90022 039 ***150.00

DOCUMENT # P04000065373	
1. Entity Name METRO FIRST REALTY INVESTMENT, INC.	

Principal Place of Business 2253 CENTRAL AVENUE SAINT PETERSBURG, FL 33713	Mailing Address 2253 CENTRAL AVENUE SAINT PETERSBURG, FL 33713
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2. Principal Place of Business - No P.O. Box # 341 3rd Street S.	3. Mailing Address 341 3rd Street S.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

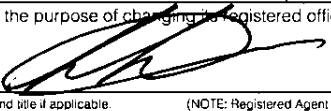
City & State St. Petersburg, FL	City & State St. Petersburg, FL
Zip 33701	Zip 33701
Country U.S.A.	Country U.S.A.

01242008 Chg-P CR2E034 (12/06)

4. FEI Number 20-1079428	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent VILLARI, MARCO 2253 CENTRAL AVENUE SAINT PETERSBURG, FL 33713	
7. Name and Address of New Registered Agent Name Villari, Marco Street Address (P.O. Box Number is Not Acceptable) 341 3rd Street S. City St. Petersburg FL Zip Code 33701	

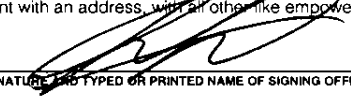
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **Marco Villari** 1/25/08
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, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS VILLARI, MARCO 2253 CENTRAL AVENUE SAINT PETERSBURG, FL 33713 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS Villari, Marco 341 3rd Street S. St. Petersburg, FL 33701 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input 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:  **Marco Villari** 1/25/08 727-822-0038
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #