


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000072904	
1. Entity Name METZ BEYER PUBLISHING INC.	

Principal Place of Business 7101 W. COMMERCIAL BLVD. SUITE 4-D TAMARAC, FL 33319	Mailing Address 7101 W. COMMERCIAL BLVD. SUITE 4-D TAMARAC, FL 33319
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02172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1103430	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

**METZ, LISA
7101 W. COMMERCIAL BLVD.
SUITE 4-D
TAMARAC, FL 33319**

DO NOT WRITE IN THIS SPACE

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 re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 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

TITLE P	NAME METZ, LISA	STREET ADDRESS 8310 BLACK OLIVE DRIVE	CITY-ST-ZIP TAMARAC, FL 33321
TITLE VP	NAME BEYER, HEATHER	STREET ADDRESS 211 N.E. 55 STREET	CITY-ST-ZIP FT. LAUDERDALE, FL 33334
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

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03/03/06 80045-002 150.00

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: *Lisa Metz - Pres.* **2/17/06** **954-720-2555**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #