## 2007 FOR PROFIT CORPORATION

## Apr 27, 2007 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # P05000147544 04-27-2007 90227 036 \*\*\*150.00 METROPOLITAN PROPERTY MANAGEMENT SERVICES. INC. 00043112 Principal Place of Business Mailing Address 10051 NW 32ND TERRACE 10051 NW 32ND TERRACE DORAL, FL 33172 DORAL, FL 33172 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 8700 West Flagler Street 8700 West Flagler Street Suite, Apt. #, etc. Suite, Apt. #, etc. 01052007 Cha-P CR2E034 (12/06) 355 355 City & State City & State 4. FELNumber Applied For Miami FL Miami FL 20-3732527 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33174 USA 33174 LISA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Ariel E Gutierrez GUTIERREZ, ARIEL E Street Address (P.O. Box Number is Not Acceptable) 8700 West Flagler Street 10051 NW 32ND TERRACE DORAL, FL 33172 Suite 355 City Zip Code Miami 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. Ariel E. Gutierrez, President 01/08/2007 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registerer) Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Delete TITLE TITLE ☐ Addition GUTIERREZ, ARIEL E NAME NAME Ariel E Gutierrez 10051 NW 32ND TERRACE STREET ADDRESS STREET ADDRESS 8700 West Flagler Street Suite 355 CITY-ST-ZIP DORAL, FL 33172 CITY-ST-ZIP Miami, Florida 33174 ☐ Delete TITLE Secretary [X] Change Addition BARÇALA, MARIBEL A Maribel A Barcala NAME NAME 9737 NW 41ST STREET, #539 8700 West Flagter Street Suite 355 STREET ADDRESS STREET ADDRESS DORAL, FL 33178 CITY-ST-ZIP CITY-ST-ZIP Miami, Florida 33174 TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete ☐ Change TITLE THILE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Defete ☐ Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Defete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS

CITY-ST-7IP

12. Thereby 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

SIGNATURE:

changed, or on a attachr

ent with an ad

CITY-ST-7IP

Ariel E. Gutierrez, President ATURE AND ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ress, with all other like empowered

01/08/2007

305 553-8911

**FILED**