

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000159577

FILED
Mar 04, 2008
Secretary of State

Entity Name: METROPOLITAN MOVING & TRANSPORTATION, INC.

Current Principal Place of Business:

2721 OCEAN CLUB BLVD
APT. 204
HOLLYWOOD, FL 33019

New Principal Place of Business:

3440 DOUGLAS RD
203
MIRAMAR, FL 33025

Current Mailing Address:

2721 OCEAN CLUB BLVD
APT # 204
HOLLYWOOD, FL 33019

New Mailing Address:

3440 DOUGLAS RD
203
MIRAMAR, FL 33025

FEI Number: 20-3922036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMLI, ISKENDER
2721 OCEAN CLUB BLVD
APT. 204
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

CAMLI, ISKENDER
3440 DOUGLAS RD
203
MIRAMAR, FL 33025 US

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.

SIGNATURE: ISKENDERCAMLI

03/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR. () Delete
Name: CAMLI, ISKENDER
Address: 2721 OCEAN CLUB APT # 204
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR. (X) Change () Addition
Name: CAMLI, ISKENDER
Address: 3440 DOUGLAS RD
City-St-Zip: MIRAMAR, FL 33025

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ISKENDERCAMLI

DIRE

03/04/2008

Electronic Signature of Signing Officer or Director

Date