

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P34126

(3)

1. Corporation Name

METRO-SUBURBIA, INC.



Principal Place of Business

160 E 45TH ST  
37TH FLOOR  
NEW YORK NY 10017  
US

Mailing Address

350 MADISON AVE 15TH FLOOR  
ATTN: ~~G. KAPAS~~ Ingrid C. Main  
NEW YORK NY 10017  
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

3. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

05/29/1991

3a. Date of Last Report

05/01/1995

4. FEI Number

11-2016787

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

81

Name

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent or individual applicant

Signature, typed or printed name of registered agent or individual applicant

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME RUSSELL, EDWIN F.  
STREET ADDRESS 485 LEXINGTON AVENUE  
CITY-ST-ZIP NEW YORK NY

☐ DELETE

TITLE VD  
NAME NEWHOUSE, S.I., JR.  
STREET ADDRESS 350 MADISON AVENUE  
CITY-ST-ZIP NEW YORK NY

☐ DELETE

TITLE S  
NAME NEWHOUSE, MARK W.  
STREET ADDRESS STAR LEDGER PLAZA  
CITY-ST-ZIP NEWARK NJ

☐ DELETE

TITLE V  
NAME NEWHOUSE, DONALD E.  
STREET ADDRESS STAR LEDGER PLAZA  
CITY-ST-ZIP NEWARK NJ

☐ DELETE

TITLE V  
NAME SCHOENBACHER, ROBERT N  
STREET ADDRESS 140 E 45TH ST 37TH FLOOR  
CITY-ST-ZIP NEW YORK NY

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

100001833141  
-05/21/96--01145--041  
\*\*\*200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mark Newhouse  
DIRECTOR/V.P.

4/10/96

201-877-4121

CR2E034 (12/95)