## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P34126 METRO-SUBURBIA, INC.

I am an officer or director of the corporation or the appears in Block 12 or Block 13 if changed, or a

SIGNATURE:

(3)

## **FILED** Feb 06 1997 8:00am Secretary of State

Daylerie Phone # 0003972

Date

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	MINNI ELNIP IPNIG PI	. PP	100 E BIBJI <b>KIBI</b> I #80

Principal Place 160 E 45TH ST 37TH FLOOR NEW YORK NY US		Mailing Address 350 MADISON AVE 15TH FLOOR ATTN: INGRID C. MORIN NEW YORK NY 10017-3704 US		3. Date incorporated or Qualified 05/29/1991	3°, Dal 21996	Report			
2. Principal Fl	ace of Business	2a. Mailing Address					<u> </u>	Applied For	
21		26				4. FEI Number 11-2016787	. —	Not Applicable	
Suite, Apt :	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1 7 7 7 7	Additional Required	
City & Statu 23	)	City & State				Election Campaign Financing     Trust Fund Contribution		May Be	
Zip 24	Country 25	Zip Country 29 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
	9. Name and Address of Current			<u> </u>		10. Name and Address of New Re	gistered Agent		
	CORPORATION SYSTEM			81	Name				
	S. PINE ISLAND ROAD ITATION FL 33324			82	Street Add	ress (P.O. Box Number is Not Acceptab	ole)		
				63					
				84	City		FL 85 Z	p Code	
11. Pursuant to office or reagent. Lar	o the provisions of Sections 607 0502 ogistered agent, or both, in the State on in familiar with, and accept the obliga	and 607.1508, Florida State of Florida Such change was tions of Section 607.0505, F	utes, the a authorize lorida Sta	bove d by tutes	e-named corpora the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing	its registered as registered	
SIGNATURE									
	Signature, typed or puriou name of registered agon			d Age	nt signature requ	ired when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE	ODE IN 12	
12.	PD OFFICERS AND	DELETE	13.	IT E		ADDITIONS/CHANGES TO OFFIC	Chang		
NAME	RUSSELL, EDWIN F.	L. DECEN	1.2 N		i		Unding	o Lindon	
STREET ADORESS	485 LEXINGTON AVENUE				ADDRESS				
CITY-ST-ZIF	NEW YORK NY			HTY-S					
TITLE	VD	DELETE	2.1 T		1-54		Chang	e Addition	
NAME	NEWHOUSE, S.I., JR.		2.2 N						
STREET ADDRESS	350 MADISON AVENUE		2.3 S	TREET	ADDRESS				
CITY+ST-ZIP	NEW YORK NY				ST - ZIP				
TITLE	8	DELETE	3.1 1				Chang	e Addition	
NAME	NEWHOUSE, MARK W.		3.2 N	IAME					
STREET ADDRESS	STAR LEDGER PLAZA		3.3 \$	TREET	ADDRESS				
C-TY - ST - ZIP	NEWARK NJ		34.0	OITY-5	ST-ZIP				
THLE	APPRIORIES DOUBLE F	DELETE	4.1 7	ITLE			Chang	e 🔲 Addition	
NAME	NEWHOUSE, DONALD E.		4.21	NAME					
STREET ADDRESS	STAR-LEDGER PLAZA		4.3 \$	TREET	ADDRESS				
C(TY+ST+7)P	NEWARK NJ		440	JTY-S	T-ZIP				
TITLE	OCHOCHBACHED CORECT N	DELETE	51T	ITLE			☐ Chang	e 🔲 Addition	
NAME	SCHOENBACHER, ROBERT N		52 N	IAME					
STREET ADORESS	140 E 45TH ST 37TH FLOOR		5.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	NEW YOK NY		5.4 (	HTY-S	T- ZIP				
TITLE		DELETE	6.1 T	ITLE	_		☐ Chang	e 🔲 Addition	
NAME			6.2 N	AME					
STREET ADDRESS			6.3 5	STREET	ADDRESS				
CITY-ST-ZiP				ITY- S					
informatio	by certify that the information supplied in indicated on this annual report or si flicer or director of the corporation or	uppie nental e inue fepo i is	ue and	acci	urate and tha	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega ort as required by Chapter 607, Florida S	al effect as if made	under oath; that	