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

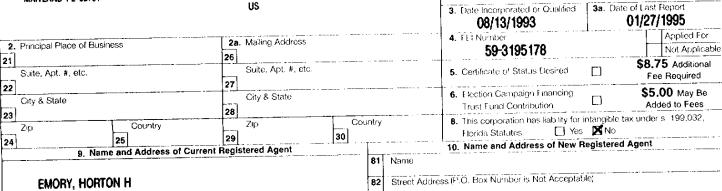
DOCUMENT #	P93000057704	(7)

METRO COLLECTION SERVICE, INC.

Principal Place of Business 755 WOODSIDE ROAD MAITLAND FL 32751

Mailing Address

5415 LAKE HOWELL ROAD WINTER PARK FL 32792



755 WOODSIDE ROAD MAITLAND FL 32751

	Florida Statutes
Ι	10. Name and Address of New Registered Agent
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 hoard of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE	gnature, typeo or printed name of registered agonf and ti	te danokratiko (NOTi	: Bugichere! Agent signature requires	Atten tempi dangi
12.	OFFICERS AND DI	RECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VP	DELFTE	1 1 TITLE	Change Addition
NAMÉ	EMORY, HORTON H		1.2 NAME	
STREET ADDRESS	755 WOODSIDE RD.		1.3 STREET ADDRESS	
C-TY-S1-ZIP	MAITLAND FL		1.4 C/TY - ST - Z/F	Cnange Addition
TITLE	P	☐ DELETE	2 1 TITLE	
NAME	EMORY, SHIRLEY J		2.2 NAME	
STREET ADDRESS	755 WOODSIDE RD		2.3 STREET ADDRESS	'
CITY-ST-ZIP	MIATLAND FL		2.4 C/TY - ST - Z/P	Change Addition
TITLE		☐ DELETE	3 1 TUTLE	Citative T Mag tion
NAME			3.2 NAME	
STHEET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-7IP			3 4 CHY - ST - ZIF	Change Addition
TITLE		☐ DELETE	4 1 TITLE	C o thigh C was as a
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADORESS	
CITY-ST-ZIP			4 4 CHY-S1-ZIP	☐ Change ☐ Addition
TITLE		DELETE	5 tititle	
NAME			5.2 NAME	
STREET ADDRESS			5 3 STREET ADDRESS	
CITY-ST-ZIP			5.4 C:1Y-ST-ZIP	Change Addition
TITLE		DELETE	6 1 TITLE	
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY C1 7ID			6.4 CHY-ST-ZP	ALO OZIZIVIA Et alda Chandoo I fudhor

14. I do hereby certify that the information supplied with this filing is voluntarily turnished 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 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 certify 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 18 if changed, or on an attachment with an address.

SIGNATURE

3/18/96

407. 628. 9741