Applied For

Fee Required \$5.00 May Be

Added to Fees

No Applicable \$8.75 Additional

⊒No

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90221 030 \*\*\*150.00

## 

DOCUMENT #	¥	P93000075395
I. Corporation Name		. 000000.0000

1. Corporation Name MET PUBLISHING CORPORATION		
Mailing Address		
6204 29TH ST E Bradenton FL 34203		DO NOT WRITE IN THIS SPAC
		Date Incorporated or Qualifed     11/01/1993
2a. Mailing Address 26		4. FEI Number 65-0445358
Suite, Apt. #, etc.		5. Certifcate of Status Desired F
City & State		6. Electic n Campaign Financing Trust Fund Contribution  State   A
Zip 29	Country 30	8. This corporation owes the current year Intangible Personal Property Tax.
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent
	81 Name 82 Street Ac	ldress (P.O. Bo): Number is Not Acceptable)
	Mailing Address 6204 29TH ST E BRADENTON FL 34203  2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	Mailing Address 6204 29TH ST E BRADENTON FL 34203   2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 urrent Registered Agent  81 Name

DO	NOT	WRITE	IN	THIS	SPACE

BAN	KUTY, GEZA E								
6204 29TH ST E BRADENTON FL 34203			82 Street Address (P.O. Box Number is Not Acceptable)						
		-				las	Zin C		
		84	City		<b>F</b> !	L  85	Zip C	ode	
office or r	to the provisions of Sections 607.0502 and 607.1508. Florida Statt tes, the registered agent, or both, in the State of Florida. Such change was authorized familiar with, and accept the obligations of, Section 607.0505, Florida St	zed by i	tne corpo	corporation submi- pration's board of e	s this statement for the purpose of lirectors. I hereby accept the app	of changi pintment	ng its i as reg	egistered istered	
SIGNATUFE	Signature, typed or printed ha ne of registered agent and title if applicable. (NOT E: Register	vari Anon'	t signature (	equired when reinstating)	DATE				
12.	Cigito III (1) per ci più il ci più	3.	· Signatura ,		DNS/CHANGES TO OFFICERS	AND DIR	ECTO	RS IN 12	
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NAME		2 NAME		1					
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NAME	2.	2 NAME							
STREET ADDRE 38	2.	3 STREET	ADDRESS						
CITY-ST-ZIP	2.	4 CITY-ST	T-ZIP	<u> </u>	. <u></u>				
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NAME	3:	2 NAME							
STREET ADDRESS	3.	3 STREET	ADDRESS						
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NAME	<b>₹</b> ***	2 NAME							
STREET ADDRESS	·		ADDRESS						
CITY-ST-ZIP		4 CITY-ST	-ZIP					- Addition	
TITLE	☐ DELETE 6.	1 TITLE				[_]C	hange	☐ Addition	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07 3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied ental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that it am an officer or director of the corporation or the jeceiver 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, with a lother like empowered.

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

12. TITLE

NAME

SIGNING OFFICEF OR DIRECTOR

4-16-99

941-755-5550

Daytirne Phone #