

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 # **994000019794**

1. Corporation Name

METRO INDUSTRIES & TRADING, CORP.

Principal Place of Business

Mailing Address

**13034 S.W. 133rd Ct.
Miami, Florida 33186**

**13034 S.W. 133rd Ct.
Miami, Florida 33186**

2. Principal Place of Business

2a. Mailing Address

21 13034 S.W. 133rd Ct.

26 13034 S.W. 133rd Ct.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Miami, Florida

28 Miami, Florida

Zip

Zip

Country

Country

24 33186

25 USA

29 33186

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
03-15-1994

3a. Date of Last Report
1995

4. FEI Number
65-0473671

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

**JOHN M. MACDANIEL
One Biscayne Tower, Suite 2975
Two South Biscayne Blvd,
Miami, Florida - 33131**

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 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE

Signature of person or persons designated to represent the corporation

Signature of Registered Agent designated to represent the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE **P/VP/S/T** ☐ DELETE
NAME **Vieira, Reinaldo**
STREET ADDRESS **14688 S.W. 132Avenida**
CITY-STATE-ZIP **Miami, Florida 33186**

TITLE **D** ☐ DELETE
NAME **Goncalves, Sebastiao**
STREET ADDRESS **Av. Rainha Ginga, 150 A**
CITY-STATE-ZIP **Luanda, Angola**

TITLE **D** ☐ DELETE
NAME **Roballo, Mauro**
STREET ADDRESS **Av. Rainha Ginga, 150 A**
CITY-STATE-ZIP **Luanda, Angola**

TITLE **D** ☐ DELETE
NAME **Pereira, Nilson**
STREET ADDRESS **Av. Rainha Ginga, 150 A**
CITY-STATE-ZIP **Luanda, Angola**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

000001843780
-05/30/96--01014--003
*****233.75**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

20, 96 - (315) 232-5311
Date
Daytime Phone #

CR2E034 (12/95)