2000 UNIFORM BUSINESS REPORT (UBR) Apr 18, 2000 8:00 am Secretary of State DOCUMENT # **P94000019794** 1. Entity Name METRO INDUSTRIES & TRADING, CORP. 04-18-2000 90214 021 ***158.75 Mailing Address Principal Place of Business 13054 SW 133RD COURT 13054 SW 133RD COURT MIAMI FL 33186-5855 MIAMI FL 33186 UUU32280 2. Principal Place of Business 13200 S.W. 128th Street 3. Mailing Address 13200 S.W. 128th Street Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite E-4 Suite E-4 Applied For City & State City & State 4. FEI Number 65-0473671 Not Applicable Miami, Florida Miami, Florida Country \$8.75 Additional 5. Certificate of Status Desired 33186 33186 USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MACDANIEL, JOHN M Street Address (P.O. Box Number is Not Acceptable) ONE BISCAYNE TOWER, SUITE 2975 TWO SOUTH BISCAYNE BLVD MIAMI FL 33131 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. **PVST** ☐ Addition Change Ρ ☐ Delete TITLE TITLE VIEIRA. REINALDO R VIEIRA, REINALDO NAME NAME 13054 S.W. 133 Court 13054 SW 133RD COURT STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Miami, Florida **MIAMI FL 33186** T/S Addition ☐ Change TITI F ☐ Delete TITLE NAME DONDO, WILSON NAME STREET ADDRESS 13201 S.W. 146th Street STREET ADDRESS CITY-ST-ZIP Miami, Florida 33186 CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

SIGNATURE:

NAME

STREET ADDRESS



☐ Delete

265 23 258// Daytime Phone #

☐ Change

☐ Addition