
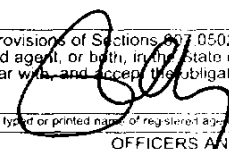


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 00-1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94 000021614			
1. Corporation Name META-FLORIDA INCORPORATED			
Principal Place of Business c/o KELLY & KELLY CPAS 3020 N FEDERAL HWY PLAZA 3000, BLDG 11 FORT LAUDERDALE, FL 33306		Mailing Address c/o KELLY & KELLY CPAS 3020 N FEDERAL HWY PLAZA 3000, BLDG 11 FORT LAUDERDALE, FL 33306	
2. Principal Place of Business	2a. Mailing Address		
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.		
22 City & State	27 City & State		
23 Zip	28 Zip		
24 Country	29 Country		
9. Name and Address of Current Registered Agent			
IRA C. HATCH 901 SE 17th STREET #206 FORT LAUDERDALE, FL 33316			
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 board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE  JOHN KELLY		81 Name JOHN KELLY 82 Street Address (P.O. Box Number is Not Acceptable) 3020 N FEDERAL HIGHWAY 83 PLAZA 3000, BLDG #11 84 City FORT LAUDERDALE 85 Zip Code FL 33306	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PTD	11 TITLE	12 NAME	
NAME SAPAGOVSKY, ALEXANDER	12 NAME	13 STREET ADDRESS	
STREET ADDRESS 3011 NE 45th STREET	13 STREET ADDRESS	14 CITY-ST-ZIP	
CITY-ST-ZIP FORT LAUDERDALE, FL 33308	14 CITY-ST-ZIP	21 TITLE	
TITLE SD	21 TITLE	22 NAME	
NAME MANEVSKAY, IRINA	22 NAME	23 STREET ADDRESS	
STREET ADDRESS 3011 NE 45th STREET	23 STREET ADDRESS	24 CITY-ST-ZIP	
CITY-ST-ZIP FORT LAUDERDALE, FL 33308	24 CITY-ST-ZIP	31 TITLE	
TITLE	31 TITLE	32 NAME	
NAME	32 NAME	33 STREET ADDRESS	
STREET ADDRESS	33 STREET ADDRESS	34 CITY-ST-ZIP	
CITY-ST-ZIP	34 CITY-ST-ZIP	41 TITLE	
TITLE	41 TITLE	42 NAME	
NAME	42 NAME	43 STREET ADDRESS	
STREET ADDRESS	43 STREET ADDRESS	44 CITY-ST-ZIP	
CITY-ST-ZIP	44 CITY-ST-ZIP	51 TITLE	
TITLE	51 TITLE	52 NAME	
NAME	52 NAME	53 STREET ADDRESS	
STREET ADDRESS	53 STREET ADDRESS	54 CITY-ST-ZIP	
CITY-ST-ZIP	54 CITY-ST-ZIP	61 TITLE	
TITLE	61 TITLE	62 NAME	
NAME	62 NAME	63 STREET ADDRESS	
STREET ADDRESS	63 STREET ADDRESS	64 CITY-ST-ZIP	
CITY-ST-ZIP	64 CITY-ST-ZIP		

FILED

99 MAY -4 PM 5:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/21/94**
4. FEI Number **65-0495300** 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 owes the current year Intangible Personal Property Tax ☒ Yes ☐ No
10. Name and Address of New Registered Agent

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(n), 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 in an attachment with an address, with all other like empowered

SIGNATURE:  **ALEXANDER SAPAGOVSKY**

MARCH 23, 1999

(954)561-0557

CR2E034 (11/98)

REINSTATEMENT 98-99

TS 5/6/99