2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P94000029780

1. Entity Name
METROPICAS DESIGN, INC.

Principal Place of Business	Mailing Address
1122 E ATLANTIC AVE B DELRAY BEACH, FL 33483 US	PO BOX 613 BOCA RATON, FL 33429 US

10

04202004   No Chg-P   CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0480924	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BLACK, BRIAN
727 ST. ALBANS DRIVE
BOCA RATON, FL 33486

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE 4/18-04

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BLACK, BRIAN
STREET ADDRESS	727 ST. ALBANS DRIVE
CITY-ST-ZIP	BOCA RATON, FL 33486
TITLE	VPD
NAME	BLACK, CARLA
STREET ADDRESS	727 ST. ALBANS DR.
CITY-ST-ZIP	BOCA RATON FL 33486
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____