SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

| DOCUMENT # | P94000064545 | (4) |
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## METRO CENTRAL MATERIALS CORP.



| Principal Prace of Business Mailing Address  5013 GATEWAY AVE 5013 GATEWAY A  ORLANDO FL 32821 ORLANDO FL 328  US US  |  | TEWAY AVE                 |                        |  | 3. Date Incorporated or Qualified 09/01/1994 3a. Date of Last Report 05/18/1995   |  |                      |                         |                                  |
|---|--|---------------------------|------------------------|--|---|--|----------------------|-------------------------|----------------------------------|
| · ·   | lace of Business   | 2a. Mailing               | Address                |  | ******* ·* ********   | 4. FEI Number  |                      |                         | Applied For                      |
| 21 Suite, Apt.  | # etc  | 26 Suite 4                | Apt #, etc             |  |   | 59-3266398   |                      |                         | Not Applicable  Additional       |
| 22  | ,, 0.0   | 27                        | ipe n. etc             |  |   | 5. Certificate of Status Desired                       | $\square$            |                         | Required                         |
| City & State  | €  | City & !                  | State                  |  |   | 6. Election Campaign Financing                         |                      |                         | May Be                           |
| 23  | Country  | 28                        |                        | Coun   |   | Trust Fund Contribution                                |                      |                         | d to Fees                        |
| Zip<br>24   | Country 25   | Zıp<br><b>29</b>          |                        | 30   | itry  | This corporation has liability for in Elorida Statutes | intangible<br>Tyes F | tax under<br>No         | s 199.032,                       |
|   | 9. Name and Address of Curre   |                           | gent                   | 1301   |   | 10. Name and Address of New Re                         | :                    |                         |                                  |
| MA  | SHBURN, ERIC % OF K H  |                           |                        |  | 81 Name   |  |                      |                         |                                  |
| 518   | B MAPLEST  |                           |                        | 1  | 82 Street   | Address (P.O. Box Number is Not Acceptab               | ole)                 | // AMURANA ARRA M. BAA  |                                  |
|   | ITE 105  |                           |                        |  | B3  |  | <del> </del>         |                         |                                  |
| Wil   | NTER GARDEN FL 32301   |                           |                        |  |   |  |                      | <del></del>             |                                  |
|   |  |                           |                        | 1  | B4 City   |  | FL                   | 85 Z                    | p Code                           |
| 1   | //. <i>PP: 14 FV A</i> .   | UIZ                       |                        |  | by the corpo<br>es  |  |                      |                         |                                  |
| SIGNATURE   | OFFICE HS A  | gent are the if applicate | (Ni)                   | IE Hogovered   | Agant's guature   | required when reestating) ADDITIONS/CHANGES TO OFFIC   | DAIL<br>CERS AND     |                         |                                  |
| SIGNATURE  12.  TITLE   | OFFICERS A   |                           |                        | IE. Hogovered  13. 11 III)   | Agant s graduro   |  |                      | DIRECTO<br>Chang        |                                  |
| SIGNATURE  12. TITLE NAME   | OFFICERS A  VPDQ HAWTHONE, CHAS  |                           | (Ni)                   | 18. Hogoverst 13. 11 FIR 12 NAM  | Agant signalure<br>E<br>ME  |  |                      |                         |                                  |
| SIGNATURE  12. TITLE  | OFFICERS A   |                           | (Ni)                   | 11 Hegs weed 13. 11 Hr 12 NAM 13 STR   | Agant s graduro   |  |                      |                         |                                  |
| SIGNATURE  12. TITLE NAME STREET ADDRESS  | OFFICERS A  VPDQ  HAWTHONE, CHAS  12515 LK BUYAK CT  ORLANDO FL  PD  |                           | (Ni)                   | 11 Hegs weed 13. 11 Hr 12 NAM 13 STR   | Agent signature  E  ME  BEET ADDRESS Y-ST-ZiP   |  |                      |                         | e Addit.or.                      |
| SIGNATURE  12.  TITLE  NAME  STREEF ADORESS  CITY-SI-ZIP  TITLE  NAME   | OFFICERS A  VPDQ  HAWTHONE, CHAS  12515 LK BUYAK CT  ORLANDO FL  PD  HEROLD, K M   |                           | DELETE                 | 13.<br>11 TITL<br>12 NAA<br>13 STR<br>1.4 CIT<br>2 1 TITL<br>2 2 NAA   | Agent signature  E  ME  EET ADDRESS Y - ST - ZiP  E  ME   |  |                      | Chang                   | e Addit.or.                      |
| SIGNATURE  12. TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  | OFFICERS A  VPDQ HAWTHONE, CHAS 12515 LK BUYAK CT ORLANDO FL PD HEROLD, K M 5018 GATZAMM AVE   |                           | DELETE                 | 18. Hogoward 13. 11 TITE 12 NAM 13 STR 1.4 CIT 21 TITE 22 NAM 23 STR   | Agent signature  E  ME  SEET ADDRESS Y-ST-ZiP  E  ME  SEET ADDRESS  |  |                      | Chang                   | e Addit.or.                      |
| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME   | OFFICERS A  VPDQ  HAWTHONE, CHAS  12515 LK BUYAK CT  ORLANDO FL  PD  HEROLD, K M   |                           | DELETE                 | 18. Hogoward 13. 11 TITE 12 NAM 13 STR 1.4 CIT 21 TITE 22 NAM 23 STR   | Agent signature  E  ME  SEET ADDRESS Y-ST-ZiP  E  ME  SEET ADDRESS Y-ST-ZIP   |  |                      | Chang                   | e Addit.on<br>e Addition         |
| SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP  | OFFICERS A  VPDQ HAWTHONE, CHAS 12515 LK BUYAK CT ORLANDO FL PD HEROLD, K M 5018 GATZAMM AVE ORLANDO FL  |                           | DELETE  DELETE         | 18. Hogoward 13. 11 THE 12 NAN 13 STA 14 CH 21 THE 22 NAN 23 STR 24 CH   | Agent signature  E  AE  BEET ADDRESS Y-ST-ZiP  B  BEET ADDRESS Y-ST-ZIP  E  F  F  F  F  F  F  F  F  F  F  F  F  |  |                      | Chang Chang             | e Addit.on<br>e Addition         |
| SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS  | OFFICERS A  VPDQ HAWTHONE, CHAS 12515 LK BUYAK CT ORLANDO FL PD HEROLD, K M 5018 GATZAMM AVE ORLANDO FL V HEROLD, R T BOX 590583                           |                           | DELETE  DELETE         | 18. Hogoward  13. 1 1 TITL 1 2 NAN 1 3 STR 1 4 CIP 2 1 TITL 2 2 NAN 2 3 STR 2 4 CIT 3 1 TITL 3 2 NAN 3 3 STR   | Agent signature  E  AE  BEET ADDRESS Y-ST-ZiP  E  BEET ADDRESS Y-ST-ZiP  E  ME  BEET ADDRESS  ME  BEET ADDRESS  |  |                      | Chang Chang             | e Addit.on<br>e Addition         |
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| SIGNATURE  12. TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS  | VPDQ HAWTHONE, CHAS 12515 LK BUYAK CT ORLANDO FL PD HEROLD, K M 5018 GATZAMM AVE ORLANDO FL V HEROLD, R T BOX 590583 ORLANDO FL T HEROLD, K P.O. BX 540645 |                           | DELETE  DELETE  DELETE | 18. Hogowaya<br>13.<br>1 1 Title<br>1 2 NAM<br>1 3 STA<br>1 4 CIT<br>2 1 Title<br>2 2 NAM<br>2 3 STR<br>2 4 CIT<br>3 1 Title<br>3 2 NAM<br>4 1 Title<br>4 2 NA<br>4 3 STA<br>4 4 CIT<br>5 1 Title<br>5 2 NAM<br>5 3 STA                  | Agent signature  E  ME  ME  ME  ME  ME  ME  ME  ME  ME  |  |                      | Chang Chang Chang       | e Addition e Addition e Addition |
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| SIGNATURE  12. TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP | VPDQ HAWTHONE, CHAS 12515 LK BUYAK CT ORLANDO FL PD HEROLD, K M 5018 GATZAMM AVE ORLANDO FL V HEROLD, R T BOX 590583 ORLANDO FL T HEROLD, K P.O. BX 540645 |                           | DELETE  DELETE  DELETE | 18. Hogo was 1 13. 1 1 TITE 1 2 NAM 1 3 STR 1 4 CIT 2 1 TITE 2 2 NAM 2 3 STR 2 4 CIT 3 1 TITE 3 2 NAM 3 3 STR 4 1 TITE 4 2 NA 4 3 STR 4 4 CIT 5 1 TITE 5 2 NAM 5 3 STR 5 4 CIT   | Agent signature  E  AE  AE  BEET ADDRESS Y-ST-ZIP  E  ME                        |  |                      | Chang Chang Chang Chang | e Addition e Addition e Addition |
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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 legit 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

GNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dave There are the company of the company

SIGNATURE: