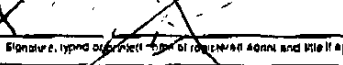
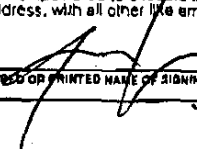


FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91013 036 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P94000088828					
1. Entity Name METRO TERRA, INC.					
Principal Place of Business 9845 NW 118 WAY MEDLEY, FL 33178			Mailing Address 9845 NW 118 WAY MEDLEY, FL 33178		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0549341	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent FERNANDEZ, JORGE 9845 NW 118 WAY MEDLEY, FL 33178				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				Zip Code	
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  (NOTE: Registered Agent Signature required when (re)appointing)					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition		
NAME	FERNANDEZ, JORGE	NAME			
STREET ADDRESS	9845 NW 118 WAY	STREET ADDRESS			
CITY-ST-ZIP	MEDLEY, FL 33178	CITY-ST-ZIP			
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition		
NAME	KOCIK, JUREK	NAME			
STREET ADDRESS	9845 NW 118 WAY	STREET ADDRESS			
CITY-ST-ZIP	MEDLEY, FL 33178	CITY-ST-ZIP			
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition		
NAME	ARIAS, FERNANDO	NAME			
STREET ADDRESS	9845 NW 118 WAY	STREET ADDRESS			
CITY-ST-ZIP	MEDLEY, FL 33178	CITY-ST-ZIP			
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition		
NAME	DIAZ, PABLO	NAME			
STREET ADDRESS	9845 NW 118 WAY	STREET ADDRESS			
CITY-ST-ZIP	MEDLEY, FL 33178	CITY-ST-ZIP			
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 907, 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: 		JORGE FERNANDEZ		4-28-04 305 800 0000	
SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		PRESIDENT		Date Daytime Phone #	

94081403



04282004 Chg-P CR2E034 (10/03)