

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED AND FILED

98 NOV 30 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000072874

1. Corporation Name

METRO USA, INC.

Principal Place of Business

Mailing Address

CORPORATE HEADQUARTERS
1950 N.W. 88 COURT
MIAMI FL 33172-2633

CORPORATE HEADQUARTERS
1950 N.W. 88 COURT
MIAMI FL 33172-2633

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable



REINSTATEMENT 98

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. Date Incorporated or Qualified To Do Business in Florida

09/18/1995

City & State

City & State

5. FEI Number

65-0265498

Applied For

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PCEO	PAZ, OSCAR JR.	8280 NORTH WEST 27TH STREET 1950 NW 88 CT.	MIAMI FL 33122 33172
			800002706308--2 -12/08/98--01067--013 ***750.00 ***750.00
			12/3

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PAZ, OSCAR JR. 8280 NORTH WEST 27TH STREET MIAMI FL 33122	Name OSCAR PAZ, JR. Street Address (P.O. Box Numbers Not Acceptable) 1950 NW 88 CT. Suite, Apt. #, Etc. MIAMI City State FL Zip Code 33172
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10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

[Signature] **NOTICE REQUIRED**
REGISTERED AGENT MUST SIGN

Date 11-19-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes No

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *[Signature]* OSCAR PAZ, JR.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-19-98 305-477-6671
Date Daytime Phone #

CR2E040 (9/98)