

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

96 OCT 14 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000083462 (8)

1. Corporation Name

METRO ONLINE, INCORPORATED



Principal Place of Business

Mailing Address

CONCORD EXECUTIVE SUITES
2875 NE 191ST STREET #517
AVENTURA FL 33180

CONCORD EXECUTIVE SUITES
2875 NE 191ST STREET #517
AVENTURA FL 33180

3. Date Incorporated or Qualified
11/01/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 701 Brickell Ave.

26 701 Brickell Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 3000

27 Suite 3000

City & State

City & State

23 Miami, FL

28 Miami, FL

Zip

Zip

24 33131

Country

Country

4. FEI Number

Applied For

68-0646067

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VEREEN, RODERICK D ESQ
4770 BISCAYNE BLVD. #1130
MIAMI FL 33137

81 Name

INTRASTATE REGISTERED AGENT CORPORATION

82 Street Address (P.O. Box Number is Not Acceptable)

701 Brickell Avenue, Suite 3000

83

84 City
Miami

FL

85 Zip Code
33131

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 agree to the provisions of, Section 607.0505, Florida Statutes.

INTRASTATE REGISTERED AGENT CORPORATION

VICE PRESIDENT

SIGNATURE

Steven H. Hagen

(NOTE: Registered Agent signature required when reinstating)

DATE

3/22/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME Rory Shur
STREET ADDRESS 2875 NE 191st Street #517
CITY-STATE-ZIP Aventura, FL 33180

TITLE PSTD
NAME Gregory Reed
STREET ADDRESS 2875 NE 191st Street #517
CITY-STATE-ZIP Aventura, FL 33180

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

400001975354-0
-10/15/96-01219-018
****225.00 ****225.00

14. 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 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 or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

3/24/96

25-87-7302

CR2E034 (12/95)