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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT *
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **P96000000738**
1. Corporation Name
**METROWALK ENTERTAINMENT CORPORATION
OF AMERICA**

Principal Place of Business
**313 CLEMATIS STREET
WEST PALM BEACH, FL.
33401**

Mailing Address
**9049 LONG LAKE PALM DRIVE
BOCA RATON, FL
33496**

REINSTATEMENT 07-98

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 313 CLEMATIS ST. Suite, Apt. #, etc.	2a. Mailing Address 26 9049 LONG LAKE PALM DRIVE Suite, Apt. #, etc.	4. FEI Number 65-0631888	Applied For ☐ Not Applicable
22 City & State 23 WEST PALM BEACH, FL	27 City & State 28 BOCA RATON, FLORIDA	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 33401	29 33496	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
25 PALM BEACH	30 PALM BEACH	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

81 Name **STEVEN I. GREENWALD, ATTORNEY**
82 Street Address (P.O. Box Number is Not Acceptable)
6971 N. FEDERAL HIGHWAY
83
84 City **BOCA RATON** FL 85 Zip Code **33487**

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 accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE **Steven I. Greenwald** **6/29/98**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	SECRETARY-TREASURER ☐ Change ☒ Addition
NAME		1.2 NAME	LOWELL F. SCHNEIDER
STREET ADDRESS		1.3 STREET ADDRESS	9049 LONG LAKE PALM DRIVE
CITY-ST-ZIP		1.4 CITY-ST-ZIP	BOCA RATON, FLORIDA 33496
TITLE	☐ DELETE	2.1 TITLE	VICE PRESIDENT ☒ Change ☐ Addition
NAME		2.2 NAME	FRANK PICCOLO
STREET ADDRESS		2.3 STREET ADDRESS	5901 TOWN BAY DRIVE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	BOCA RATON, FLORIDA 33486
TITLE	☐ DELETE	3.1 TITLE	PRESIDENT ☒ Change ☐ Addition
NAME		3.2 NAME	LAWRENCE M. SCHNEIDER
STREET ADDRESS		3.3 STREET ADDRESS	7131 AYRSHIRE LANE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	BOCA RATON, FLORIDA 33496
TITLE	☐ DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 incorporator 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 if changed or on in agreement with an address.

SIGNATURE: **LAWRENCE SCHNEIDER** **6-29-98** **561-483-7754**

CR2E034 (10/97)