FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90060 018 ***150.00

$\neg \land \land$	JMENT				
1 14 16 .1	$1100 \rightarrow 1011$	I	nca	MMM)	7117
	J V L- 7	π	YOU I		,44,
				$\mathbf{O}\mathbf{O}\mathbf{O}$, ,,

1. Corporation Name

METRO REALTY SERVICES, INC.

		<u> </u>		
Principal Place	e of Business	Mailing Address		·
1750 NW 55TH		1750 NW 55TH AVE		4
LAUDERHILL FL	L 33313	LAUDERHILL FL 33313 US		DO NOT WRITE IN THIS SPACE
US		us		3. Date Incorporated or Qualifed
				01/24/1996
2. Principal P	lace of Business	2a. Mailing Address	·	4. FEI Number Applied For
		26		65-0643895 Not Applicable
Suite, Apt.	# etc.	Suite, Apt. #, etc.		\$8.75 Additional
22	,	27		5. Certificate of Status Desired Fee Required
City & State	е	City & State	 -	6. Election Campaign Financing S5.00 May Be
23	-	28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	This corporation owes the current year Intangible
24	25	29 3	o	Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Currer		1	10. Name and Address of New Registered Agent
			81 Name	
MCD	OONOUGH, RICHARD		20 6	Add (D.O. Day N has in Net Assemble)
1750	NW 55TH AVE, OFFICE		82 Street	Address (P.O. Box Number is Not Acceptable)
LAUI	DERHILL FL 33313		83	
			/ 84 City	FL 85 Zip Code
44 Purguent	to the previous of Sections 607 050	22 and 607 1408 Florida Statutes	the above-named	
office or re	egistered agent, or both, in the State	of Florida. Guch change was and	norized by the corp	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
	m familiar with ∿alid accept/the⊿bliga	ations of, Steption 607,0505, Mono	la Statutes.	
agent. rai	V //	n. Y d.	7) /	II MCDamonh
SIGNATURE	* Les and U'	he harough	KILHARD	W. McDovocy h
SIGNATURE	Signature Nyped or printed name of registered age	ent and little if applicable. (NOTE: F	KILMARD egistered Agent signature	W. McDovocg is
SIGNATURE	Signature: typed or printed name of registered sign	he harough	KILHARD	required when reinstating) DATE
SIGNATURE 12. TITLE	Signature Newpod or printed name of registered ege OFFICERS AN	ent and little if logicable. (NOTE: R	KILHARD egistered Agent signature 13. 1.1 TITLE	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	Signature Avped or printed name of registered ege OFFICERS AN P MCDONOUGH, RICHARD W.	ent and little if logicable. (NOTE: R	KILARD egistered Agent signature 13. 1.1 TITLE 1.2 NAME	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	ent and little if logicable. (NOTE: R	RICHARD egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature Avped or printed name of registered ege OFFICERS AN P MCDONOUGH, RICHARD W.	ent and little if logicable. (NOTE: R	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	ont and title if goddenble. INOTE: R ND DIRECTORS	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	ont and title if goddenble. INOTE: R ND DIRECTORS	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	ont and title if goddenble. INOTE: R ND DIRECTORS	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	Int and bill if collection. (NOTE: R	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	ont and title if goddenble. INOTE: R ND DIRECTORS	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	Int and bill if collection. (NOTE: R	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	Int and bill if collection. (NOTE: R	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	Int and bill if collection. (NOTE: R ND DIRECTORS DELETE DELETE	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	Int and bill if collection. (NOTE: R	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	Int and bill if collection. (NOTE: R ND DIRECTORS DELETE DELETE	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	Int and bill if collection. (NOTE: R ND DIRECTORS DELETE DELETE	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE LAUDERHILL FL 33313	Int and bile if collection. INOTE: R ND DIRECTORS DELETE DELETE DELETE	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature wiped or printed name of registered eye OFFICERS AN P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE	Int and bill if collection. (NOTE: R ND DIRECTORS DELETE DELETE	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE LAUDERHILL FL 33313	Int and bile if collection. INOTE: R ND DIRECTORS DELETE DELETE DELETE	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME	P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE LAUDERHILL FL 33313	Int and bile if collection. INOTE: R ND DIRECTORS DELETE DELETE DELETE	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE LAUDERHILL FL 33313	IND DIRECTORS DELETE DELETE DELETE DELETE	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE LAUDERHILL FL 33313	Int and bile if collection. INOTE: R ND DIRECTORS DELETE DELETE DELETE	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.2 NAME	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE LAUDERHILL FL 33313	IND DIRECTORS DELETE DELETE DELETE DELETE	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME	P MCDONOUGH, RICHARD W. 1750 NW 55TH AVE, OFFICE LAUDERHILL FL 33313	IND DIRECTORS DELETE DELETE DELETE DELETE	egistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.2 NAME	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition

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 receiver or trustee employered to execute this report of sequired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with all other/like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/99 (954)321-1000

CR2E034 (11/98)