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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham.

FILED

Jun 10 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000023810** (0)

MET MOBILE, INC.

Principal Place of Business Mailing Address 4957 38TH AVENUE NORTH 4957 38TH AVENUE NORTH SUITE 8 SUITE 3 ST. PETERSBURG FL 33710 ST. PETERSBURG FL 33710-2174 3. Date Incorporated or Qualified 3a. Date of Last Report 03/11/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-33 Aven. Applied For 7640 Hve. N 7640 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be pura 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation has liability for intangible tax under s. 199,032. 29 30 Yes No Florida Statutos 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KLEMENT, THOMAS V Thomas 4957 38TH AVENUE NORTH 82 **SUITE E** 83 ST. PETERSBURG FL 33710 84 City Zip Code 11. Pursuant to the p pvisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or birth. In the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered with the obligations of Section 607.0505, Florida Statutes. office or registere SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. FFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) TITLE DELETE 1.1 TITLE Change Addition KLEMENT, THOMNAS V Klement Thomas V. NAME 1.2 NAM! 4957 38TH AVENUE NORTH SUITE E STREET ADDRESS 13 STREET ADDRESS ST. PETERSBURG FL 33710 CITY-ST-ZIP Reters burg 33710 1.4 C(TY - ST - ZIP DELETE TITLE ☐ Change 21 100 8 Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE TITLE 3.1 1111.6 Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-7IP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 51 TITLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE TITLE Change 6.1 TITLE ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 forporation 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 12 or an attachment within address.

CITY-ST-ZIP