**FILED** 

## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with

SIGNATURE:

with all other like empowered

CSIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRIENT MYROUD

## Jan 16, 2001 8:00 am Secretary of State DOCUMENT # P96000035793 1. Entity Name METROPOLIS ADVERTISING & DESIGN, INC. 01-16-2001 90072 022 \*\*\*150 00 Mailing Address Principal Place of Business 23 S. OSCEOLA AVE 23 S. OSCEOLA AVE ORLANDO FL 32801 C0004430 ORLANDO FL 32801 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt, #, etc. Applied For City & State 4. FÉI Number City & State 59-3376131 Not Applicable Country \$8.75 Additional -Country Zip 5. Certificate of Status Desirēd Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MYROLD, BRENT Street Address (P.O. Box Number is Not Acceptable) 23 S. OSCEOLA AVE ORLANDO FL 32801 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CHELF CYCLUTIVE OFFICER Change Delete TITLE **PVST** TITLE BRENT MYROLD NAME NAME BRENT MYROLD 23 S. OSLEDLA AVE STREET ADDRESS STREET ADDRESS 1001 ERROL PARKWAY CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32801 APOPKA FL 32712 Addition ☐ Delete PIZESIDIENT/TREASURER Change DITE NAME NAME KEVIN KENT STREET ADDRESS 23 S. OSCEDEN AVE STREET ADDRESS CITY-ST-ZIP ... 02ANDO FL 32801 -CITY-ST-ZIP-Addition Change ☐ Delete TITLE VICE PLESIDENT NAME KEVIN BOYNTON NAME 23 SOUTH OSCEOLA AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIF ORLANDO, FL 32807 Addition Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 flustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if