

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005 8:00 am
Secretary of State

03-28-2005 90054 013 ***150.00

DOCUMENT # P96000071489

1. Entity Name
MIAMI METALS, INC.



Principal Place of Business Mailing Address
300 41 STREET STE 218 300 41 STREET STE 218
MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Zip Country Zip Country

03182005 Chg-P CR2E034 (10/03)

4. FEI Number **65-0690072** Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MERRITT, ROGER J
300 41 STREET STE 218
MIAMI BEACH, FL 33140

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	HESSEN, ERIC	
STREET ADDRESS	2701 N W 32ND AVENUE	
CITY - ST - ZIP	MIAMI, FL 33142	
TITLE	ST	<input type="checkbox"/> Delete
NAME	HESSEN, GUINEVERE	
STREET ADDRESS	310 N 31 ROAD	
CITY - ST - ZIP	HOLLYWOOD, FL	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	EDEE, EBENE	
STREET ADDRESS	2701 NW 32ND AVE	
CITY - ST - ZIP	MIAMI, FL 33142	
TITLE	V	<input type="checkbox"/> Delete
NAME	WOOD, ARNIM	
STREET ADDRESS	2701 NW 32ND AVE	
CITY - ST - ZIP	MIAMI, FL 33142	
TITLE	V	<input type="checkbox"/> Delete
NAME	HESSEN, GEOFFREY	
STREET ADDRESS	2701 NW 32 AVE	
CITY - ST - ZIP	MIAMI, FL 33142	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 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

Eric Hessen

3-19-05

Date

(305) 635-4084

Daytime Phone #