

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

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000102138 (0)

1. Corporation Name
METRO PLACE, INC.

Principal Place of Business
3300 SOUTH HIAWASSEE ROAD
SUITE 107
ORLANDO FL 32835

Mailing Address
3300 SOUTH HIAWASSEE ROAD
SUITE 107
ORLANDO FL 32835-4350



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/18/1996		3a. Date of Last Report	
21	Suite, Apt. #, etc.	26	P.O. Box 4961	4. FEI Number 62-1667821		Applied For Not Applicable	
22	City & State	27	Suite, Apt. #, etc.	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23	City & State	28	Orlando, FL	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	Zip	25	Country	29	Zip	30	Country
				29	32801-4961	30	USA
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
B&C CORP. SERVICES OF CENTRAL FLORIDA 390 N ORANGE AVE SUITE 1100 ORLANDO FL 32801				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL			
				85 Zip Code			

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	P
NAME	CHIRA, LEE	1.2 NAME	Lee Chira
STREET ADDRESS	3300 SOUTH HIAWASSEE RD, STE 107	1.3 STREET ADDRESS	3300 S. Hiawassee Road, #107
CITY - ST - ZIP	ORLANDO FL 32835	1.4 CITY - ST - ZIP	Orlando FL 32835
TITLE		2.1 TITLE	V/S
NAME		2.2 NAME	Charles S. Carlton
STREET ADDRESS		2.3 STREET ADDRESS	3300 S. Hiawassee Road, #107
CITY - ST - ZIP		2.4 CITY - ST - ZIP	Orlando FL 32835
TITLE		3.1 TITLE	V./T
NAME		3.2 NAME	Steven G. Kropp
STREET ADDRESS		3.3 STREET ADDRESS	3300 S. Hiawassee Rd, #107
CITY - ST - ZIP		3.4 CITY - ST - ZIP	Orlando FL 32835
TITLE		4.1 TITLE	V./AS
NAME		4.2 NAME	E. Joseph McKinney
STREET ADDRESS		4.3 STREET ADDRESS	3300 S. Hiawassee Rd. #107
CITY - ST - ZIP		4.4 CITY - ST - ZIP	Orlando FL 32835
TITLE		5.1 TITLE	V.
NAME		5.2 NAME	Thomas Lawler
STREET ADDRESS		5.3 STREET ADDRESS	3300 S. Hiawassee Rd. #107
CITY - ST - ZIP		5.4 CITY - ST - ZIP	Orlando FL 32835
TITLE		6.1 TITLE	V.
NAME		6.2 NAME	David Wilther
STREET ADDRESS		6.3 STREET ADDRESS	3300 S. Hiawassee Rd. #107
CITY - ST - ZIP		6.4 CITY - ST - ZIP	Orlando FL 32835

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 corporation or the officer 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 an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles S. Carlton 4/25/97 407/297-1600

CR2E034 (9/96)