

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000029290

FILED
Jan 04, 2005
Secretary of State

Entity Name: MET COMMUNICATIONS, INC.

Current Principal Place of Business:

12215 N. FLORIDA AVE
TAMPA, FL 33612 US

New Principal Place of Business:

13910 N. FLORIDA AVE
TAMPA, FL 33613 US

Current Mailing Address:

PO BOX 17190
TAMPA, FL 33652

New Mailing Address:

PO BOX 17180
TAMPA, FL 33682

FEI Number: 59-3435918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, BRYAN
12215 N. FLORIDA AVE
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

THOMPSON, BRYAN
13910 N. FLORIDA AVE
TAMPA, FL 33613 US

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: BRYAN THOMPSON

01/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMPSON, BRYAN
Address: 12215 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33612

Title: VP () Delete
Name: MONDOR, RICHARD A
Address: 10401 GREENMONT DRIVE
City-St-Zip: TAMPA, FL 33626

Title: CFO () Delete
Name: ELKINS, RUSSELL M
Address: PO BOX 5035
City-St-Zip: FAIRMOUNT, WV 265555035

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THOMPSON, BRYAN
Address: 13910 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33613

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRYAN THOMPSON

P

01/04/2005

Electronic Signature of Signing Officer or Director

Date