FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State FILED DIVISION OF CORPORATIONS 1**9**98 98 APR 24 AM 9: 47 P97000083206 (7) DOCUMENT # SECRETARY OF STATE TALLAHASSEE, FLORIDA METRO PLACE II. INC. Principal Place of Business Mailing Address 3200 S. HIAWASSEE RD.: STE. 208 -- ORLANDO FL 32935 ----3200 S. HIAWASSEE RD., STE. 206 ORLANDO FL 32835 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/25/1997 P.O. Box 496 2. Principal Place of Business Applied For 26 21 59- <u>3474379</u> Not Applicable Sulte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be or 19 ndo 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B&C CORPORATE SERVICES OF CENTRAL FLORIDA** 390 N. ORANGE AVE., STE. 1100 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32835 83 84 City Zip Code FI 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** (NOTF: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. D DELETE ☐ Change ☐ Addition TITLE 1,1 TITLE CHIRA, LEE NAME 1.2 NAME 3300 S. HIAWASSEE RD., STE. 107 STREET ADDRESS 1.3 STREET ADDRESS Orlando FL 32835 CITY ST-ZIP 1.4 CITY-ST-ZIP 6000250266-04dbin -04/28/98--01054--025 ****150.00 ****150.00 DELETE 21 TITLE TUTTLE, L. MILLS 2.2 NAME 3200 S. HIAWASSEE RD., STE, 205 STREET ADDRESS 23 STREET ADDRESS ORLANDO FL 32835 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE MCKINNEY, EUGENE J NAME 3.2 NAME 3200 S. HIAWASSEE RD., STE. 205 STREET ADDRESS 3.3 STREET ADDRESS ORLANDO FL 32835 CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE ☐ Change ... Addition TITLE 4.1 TITLE LAWLER, THOMAS P NAME 4. 2 NAME 3200 S. HIAWASSEE RD., STE. 205 STREET ADDRESS 4.3 STREET ADDRESS ORLANDO FL 32835 CITY-ST-ZIP 44 CITY-ST-ZIP DELETE TITLE 51 TITLE Change Addition WILLNER, DAVID M NAME 5.2 NAME 3200 S. HIAWASSEE RD., STE. 205 STREET ADDRESS 5.3 STREET ADDRESS ORLANDO FL 32835 5.4 CITY - ST - ZIP CITY-ST-ZIP TITLE ☐ DEL**e**te 6.1 TITLE

14. 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 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 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 13 if changed, or on an attrictment with an address. D .

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

SIGNATURE:

NAME

r.

STREET ADDRESS

CITY-ST-ZIP

PEISNER, ERIC

ORLANDO FL 32835

3300 S. HIAWASSEE RD., STE. 107

Director

1-20-98 402-257-1600