


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 20, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000095793 1. Entity Name METRICOR CORPORATION	
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Principal Place of Business 13940 SW 136 ST. MIAMI, FL 33186	Mailing Address 13940 SW 136TH ST MIAMI, FL 33186 US
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**DO NOT WRITE IN THIS SPACE**



01122005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0796234	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  BENITEZ, VICTOR M 12191 SW 92ND AVE MIAMI, FL 33176-5710	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		<p>U000000186497 01/21/05-80053-010 158.75</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BENITEZ, VICTOR M 12191 SW 92ND AVE MIAMI, FL 331765110	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BENITEZ, MIRIAM C 8700 S.W. 124 STREET MIAMI, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BENITEZ, VICTOR A 14920 SW 167 ST MIAMI, FL 33187	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DUART, CARLOS A 14491 SW 161 ST MIAMI, FL 33177	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DUART, REGINA 14491 SW 161 ST MIAMI, FL 33177	
TITLE 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)(f), 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: Carlos A. Duart 1/13/05 (305) 235-5058  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #