OND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. MOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

OCUMENT

P98000017215

METRO BUSINESS SYSTEM INC

MIAMI FL 33126

FILED Sep 10, 1999 8:00 am Secretary of State

09-10-1999 90001 010 ***550.00

cipal Place of Bus	iness	Mailing Address		1 18811011 114 18181 18111 88111 88111	1849) I(BI4 18618 11481 11661 8111 1861
190 SW 82 CIRCLE 12 1MI FL 33193	LANE	15690 SW 82 CIRCLE LANE #912 MIAMI FL 33193		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 02/23/1998	
Principal Place of E		2a. Mailing Address 26 7370 NW 365	ST ·	4. FEI Number 65 - 0815546	Applied For Not Applicable
Suite, Apt. #, etc. Suite 415-I		Suite, Apt. #, etc. 27 Suite 415 -I		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	-fc	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip 33166	Country 25 USA .	Zip 29 33166 30	Country USA .	This corporation owes the current year Intangible Personal Property.	Yes No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
	RADHAMES 12 STREET		82 Street Add	ADHAMES VENTURA ress (P.O. Box Number is Not Acceptable) 5 5 BZ CIRCLE LAN	€

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.

NATURE _	Signature, typed or printed name of registered agent and title if applicable). (NO	TE: Registered Agent signature req			
	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
	D	DELETE	1.1 TITLE	Change	Addition	
	VENTURA, RADHAMES		1.2 NAME			
TADDRESS	15690 SW 82 CIRCLE LANE, #912		1.3 STREET ADDRESS			
ST-ZIP	MIAMI FL 33193		1.4 CITY-ST-ZIP			
-		DELETE	2.1 TITLE	Change	Addition	
			2.2 NAME			
T ADDRESS			2.3 STREET ADDRESS			
ST-ZIP			2.4 CITY-ST-ZIP			
		DELETE	3.1 TITLE	Change	Addition	
また	v* #*		3.2 NAME	100 A Marian Control of the Control		
T ADDRESS			3.3 STREET ADDRESS			
ST-ZiP	•		3.4 CITY-ST-ZIP			
		DELETE	4.1 TITLE	Change	Additio	
			4.2 NAME			
TADDRESS			4.3 STREET ADDRESS			
T-Z i P			4.4 CITY-ST-ZIP			
'		DELETE	5.1 TITLE	Change [Addition	
			5.2 NAME			
TADDRESS			5.3 STREET ADDRESS			
T-ZIP			5.4 CITY-ST-ZIP			
0		DELETE	6.1 TITLE	Change	Addition	
			6.2 NAME	. —		
T ADDRESS			6.3 STREET ADDRESS			
ST-ZIP	1		6.4 CITY-ST-ZIP			

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 of 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 coproportion for 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 chapted, or on an attachment with an address.

GNATURE:

(305) 486-1094