

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000019437

Entity Name: METASYS USA, INC.

FILED  
Apr 20, 2005  
Secretary of State

## Current Principal Place of Business:

5001 SW 74TH COURT  
SUITE 206  
MAIMI, FL 33155 US

## New Principal Place of Business:

## Current Mailing Address:

5001 SW 74TH COURT  
SUITE 206  
MAIMI, FL 33155 US

## New Mailing Address:

FEI Number: 65-0815999

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PELL, JOHN H CPA  
7500 RED ROAD  
SUITE C  
MIAMI, FL 33143 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KONZETT, ALFRED  
Address: FLORIANISTRASSE 3-A-6063 RUM BEI INNSBRUCK  
City-St-Zip: AUSTRIA,

Title: D ( ) Delete  
Name: PREGENZER, BRUNO  
Address: FLORIANISTRASSE 3-A-6063 RUM BEI INNSBRUCK  
City-St-Zip: AUSTRIA,

Title: AS ( ) Delete  
Name: RUFFINI, WALTER  
Address: 5001 SW 75TH CT  
City-St-Zip: MIAMI, FL 33155

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: AS (X) Change ( ) Addition  
Name: RUFFINI, WALTER  
Address: 5001 SW 75TH CT, SUITE 206  
City-St-Zip: MIAMI, FL 33155

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: WALTER RUFFINI

AS

04/20/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date