

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000071449

1. Entity Name
METLABS, INC.

Principal Place of Business
500 AUSTRALIAN AVENUE S.
SUITE 1000
WEST PALM BEACH FL 33401

Mailing Address
500 AUSTRALIAN AVENUE S.
SUITE 1000
WEST PALM BEACH FL 33401

FILED
Jun 02, 2002 8:00 am
Secretary of State

05-14-2002 90470 001 *2,100.00



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-1048555

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~MUR, LAZARO J ESQUIRE~~ *FRED STERNBERG*
~~2005 S. BAYSHORE DRIVE~~ *500 AUSTRALIAN AVE SO*
~~SUITE 703~~ *SUITE 1000*
~~COCONUT GROVE FL 33133~~ *WEST PALM BEACH FL 33401*

Fred Sternberg
500 Australian Ave. So.
Suite 1000
West Palm Beach, FL 33401

Zip Code

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.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
NAME STERNBERG, FRED
STREET ADDRESS 500 AUSTRALIAN AVENUE S.
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Delete

TITLE D
NAME GERSTENFELD, MARK
STREET ADDRESS 500 AUSTRALIAN AVENUE S.
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ Delete

TITLE V
NAME FINNEL, DEBBIE
STREET ADDRESS 500 AUSTRALIAN AVENUE S.
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Delete

TITLE D
NAME CAHR, MICHAEL
STREET ADDRESS 500 AUSTRALIAN AVENUE S.
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ Delete

TITLE D
NAME HEIMAN, MARVIN
STREET ADDRESS 500 AUSTRALIAN AVENUE S.
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ Delete

TITLE D
NAME PRESTE, PAUL
STREET ADDRESS 500 AUSTRALIAN AVENUE S.
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ Delete

12. DIRECTORS IN 11

TITLE ST
NAME David Gartner
STREET ADDRESS 500 Australian Ave. So, Suite 1000
CITY-ST-ZIP West Palm Beach, FL 33401 ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE *[Signature]* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Fred Sternberg

4-25-02

Date

561-805-8500

Daytime Phone #

CR2E034 (9/01)