FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S09766

(4)

Mailing Address

METRIX CONSTRUCTION, INC.

FILED Apr 15 1997 8:00am Secretary of State



2060 HARVARD ST SARASOTA FL 34237		2060 HARVARD ST SARASOTA FL 34237-3420							
						3. Date Incorporated or Qualified 10/30/1990		e of Last R 6/1996	eport
2. Principal Place	e of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26	26			65-0224064		No	ot Applicable
Suite, Apt #, (etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State		City & State	City & State			6. Election Campaign Financing	r"1	\$5.00	
23		28				Trust Fund Contribution		Added t	
Zip 24	25 29 30			untry	Florida Statutes See No				
	Name and Address of Cur	rrent Registered Agent		1,		10. Name and Address of New Re	gistered A	gent	
ROCKE	e, Kenneth R			61	Name				i
2060 H	HARVARD ST SOTA FL 34237		82 Street Add		fress (P.O. Box Number is Not Acceptab	ole)	<u> </u>		
OANAO	101A FL 34237			83				Para.*	
				84	City		FL	85 Zip (Code
office or real	istered agent, or both, in the S	0502 and 607.1508, Florida Stat tate of Florida. Such change wa bligations of, Section 607.0505.	is authorize	ed by	the corpora	poration submits this statement for the pation's board of directors. I hereby accept	urpose of	changing it intment as	s registered registered
SIGNATURE									
	malare, typind or printed name of registere			<u></u> -	nt signature requ	ired when reinstating)	DATE	DISCOTOR	0.0140
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			Addition
1 .	DOORE REPRESENDE	☐ DELETE		TITLE			1	Change	L. HOUMIDH
	ROCKE, KENNETH R.		1.2 1	NAME	Ī				
	2060 HARVARD STREET		1.3 9	STREET	ADDRESS				
City-SI-ZIP	SARASOTA FL			CITY-S	T-ZIP				
TILE		DELETE	2.17	TITLE				Change	Addition
NAME			2.21	NAME	ł				
STREET ADDRESS			2.3 5	STREET	ADDRESS				
City - St - 7h*			2.4	CITY-5	T-ZIP				
TIFLE		☐ DELETE	311	TITLE				Change	Addition
NAME			321	NAME					
STREET ADDRESS			3.3 9	STREET	ADDRESS				
CITY-S1-ZiF			3.4.	CITY - S	T- ZIP				
TITLE		DELETE	4.1	TITLE				Change	Addition
NAME			4.2	NAME					
STREET ADDRESS			4.3	STREET	ADDRESS				
CITY - ST - ZIP			4.4 (CITY-S	T-ZiP				
TITLE		DELETE		TITLE				Change	Addition
NAME			5.21	NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				CITY-S					
THE		DELETE		TITLE	· 			Change	Addition
NAME		—		NAME	}		•	- - •	
STREET ADDRESS					ADDRESS				
					ADDRESS				
City-St-7iP	and the banks of a section as a	all ad with this filling does not a		CITY-S		ad in Contine 119 07/21/i) Florida Statute	o lévebos	continue that	tho

In do nereby 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 attachment with an address.

SIGNATURE:

GATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-97

941-952-177(