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

Mailing Address

2a. Mailing Address

6282 FOREST HILL BLVD.

WEST PALM BEACH FL 33415

**PROFIT CORPORATION** ANNUAL REPORT

1999

METROLINE INVESTMENT CORP.

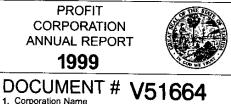
1. Corporation Name

Principal Place of Business

WEST PALM BEACH FL 33415

2. Principal Place of Business

6282 FOREST HILL BLVD.



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 17, 1999 8:00am **Secretary of State**

3. Da

4. FEI Number

02-17-1999 90094 005 \*\*\*150.00



DO NOT WRITE IN THIS SPACE
Date Incorporated or Qualifed 07/20/1992

Applied For

21		26				65-0347047		<del></del>	Applied For	
Suite, Apt	. #, etc.	etc. Suite, Apt. #, etc.			00 0041041				Not Applicable	
22		27			5.	Certifcate of Status Desired			5 Additional Required	
City & Sta	ite	City & State			6.	Election Campaign Financing	•			
23		28			•	Trust Fund Contribution			<b>0</b> May Be d to Fees	
Zip	Country	Zip	Country	/	8.	This corporation owes the cur	rent vear lo			
24	25 29 30					Personal Property Tax.		🔀 Yes	. □No	
	9. Name and Address of Current R	egistered Agent	81		10.	Name and Address of New I	Registered	Agent		
NASIF, NARIMAN 6282 FOREST HILL BLVD.				Name				-		
				82 Street Address (P.O. Box Number is Not Acceptable)						
WEST PALM BEACH FL 33415				A CONTRACTOR OF THE CONTRACTOR						
				ļ			16	50° 31' 81'	7.34 2.44 46 1. 3. 3. 184	
}			84	City	<del></del>			10 to 20	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
44 8				1			FL	1 - 1 - 1	Code ""	
11. 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 agent. I am familiar with, and accept the obligations of Section 607.0505. Florida Statutes										
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE										
12.	Signature, typed or printed name of registered agent and		tegistered Agen	t signature requir	uired when rei	instating)	DATE			
T/TLE	PSTD OFFICERS AND D		13.		A	DDITIONS/CHANGES TO OF	FICERS AN	ID DIRECT	ORS IN 12	
	NASIF, NARIMAN	☐ DELETE	1.1 TITLE		i	57 C. W.	'	☐ Change		
NAME			1.2 NAME			·				
STREET ADDRESS	7558 BRISTOL BAY LANE		1.3 STREET	ADDRESS		•				
CITY-ST-ZIP	LAKE WORTH FL		1.4 CITY-S1	- ZIP					}	
TITLE		☐ DELETE	2.1 TITLE					☐ Change	☐ Addition	
NAME			2.2 NAME							
STREET ADDRESS			2.3 STREET	ADDRESS						
CITY-ST-ZIP	<u> </u>		2. 4 CITY-S	r-ZIP						
TITLE	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	☐ DELETE	3.1 TITLE		<del></del>			☐ Change	Addition	
NAME .	t version of the second		3.2 NAME	!		,		_		
STREET ADDRESS	A second		3.3 STREET	ADDRESS		*		•. •.		
CITY-ST-ZIP			3.4. CITY-ST	-ZIP						
TITLE		☐ DELETE	4.1 TITLE		<u></u>		1, 1, 1, 1	☐ Change	: Addition	
NAME			4. 2 NAME	-						
STREET ADDRESS	• <u>-</u>		4.3 STREET	ADDRESS					}	
CITY-ST-ZIP			4.4 CITY-ST-	ZIP						
TITLE	:	☐ DELETE	5.1 TITLE					☐ Change	Addition	
NAME			5.2 NAME	1				. —		
STREET ADDRESS	5015		5.3 STREET	ADDRESS:					ĺ	
CITY-ST-ZIP	· .		5.4 CITY-ST-	ZIP	•		-		1	
TITLE		☐ DELETE	6.1 TITLE					☐ Change	Addition	
NAME			6.2 NAME			*			. C. Addition	
STREET ADDRESS		i	6.3 STREET A	ODRESS		•		•	İ	
C/TY-ST-ZIP			6.4 CITY-ST-			•				

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