

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V71958

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: METRO EDUCATION AND ENTERTAINMENT, INC.

**Current Principal Place of Business:**

5795 SW 43RD PLACE  
OCALA, FL 34474 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 770296  
OCALA, FL 34477

**New Mailing Address:**

FEI Number: 59-2951282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

QUEEN, HAROLD L  
5795 SW 43RD PLACE  
OCALA, FL 34474 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: P ( ) Delete  
Name: QUEEN, HAROLD L  
Address: P O BOX 770296  
City-St-Zip: OCALA, FL 34477

Title: T ( ) Delete  
Name: IRWIN, JOHN N  
Address: 610 LINDSAY CIRCLE  
City-St-Zip: VILLANOVA, PA 19085

Title: S ( ) Delete  
Name: QUEEN, MARK  
Address: 17534 ROYALTON RD.  
City-St-Zip: STRONGVILLE, OH 44136

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOHN N IRWIN

T

03/20/2009

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

\_\_\_\_\_  
Date