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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 509484

(2)

DYNAMIC TOOLS, INC. Principal Place of Business Mailing Address 1665 W. 32ND PLACE 1685 W. 32ND PLACE HIALEAH FL 33012 HIALEAH FL 33012-4509 3. Date Incorporated or Qualified 3a. Date of Last Report 07/23/1976 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1685088 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s 199 032, 25 Yes No 24 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GARCIA, VICTOR M. 392 LAGUNA AVE Street Address (P.O. Box Number is Not Acceptable) KEY LARGO FL 33037 83 84 City Zip 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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature legical or proceed same of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change THE 1.1 TITLE GARCIA, VICTOR M NAME 1.2 NAME 392 LAGUNA AVE 1.3 STREET ADDRESS STREET ADDRESS KEY LARGO FL 1.4 C(TY - ST - Z)P C07+51-2P DST __ DELETE Change Addition THILE 2.1 TITLE GARCIA, CARMEN O NAME 2.2 NAME 392 LAGUNA AVE STREET ALORESS 2.3 STREET ADDRESS KEY LARGO FL 2. 4 CITY - ST - ZIP CDY SI λP DELETE Change Addition THE 3.1 TITLE GARCIA, VICTOR M 3 2 NAME NAME 392 LAGUNA AVE 3 3 STREET ADDRESS STREET AGORESS KEY LARGO FL 3.4. CITY-ST-ZIP SD DELETE Change Addition 4.1 TITLE HI: 6 GARCIA, CARMEN D 4.2 NAME NAME 392 LAGUNA AVE 4.3 STREET ADDRESS STREET ADDRESS KEY LARGO FL C-TY-S1-ZP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE THILE 5.2 NAME NAM 5.3 STREET ADDRESS STEELT ADORESS CITY-ST 2IP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE HILE HAM: 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZiP CITY - \$1 - ZIP

SIGNATURE: A

Victor N. Garcia

14. I do 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 inclinated on this appeal 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 Blo

4/15/97

(305)822-6440

FILED

Apr 21 1997 8:00am

Secretary of State

0117853

CR2E034