

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
JENNIFER B. MURPHY  
COMMISSIONER OF STATE

DOCUMENT # **F94000003402 (4)**

**DYNASERV INDUSTRIES, INC.**

FILED  
MAY 1 1995  
TALLAHASSEE, FLORIDA

1. Principal Office Location: **2001 TONNELLE AVENUE NORTH BERGEN NJ 07047**  
 1a. Mailing Address: **2001 TONNELLE AVENUE NORTH BERGEN NJ 07047**

2. Principal Office Location: **21**  
 2a. Mailing Address: **261**  
 22. Subj. App. # etc.  
 23. City & State  
 24. State  
 25. County  
 26. State  
 27. State App. # etc.  
 28. City & State  
 29. State  
 30. County

3. Date of Organization or Renewal: **06/29/1994**  
 3a. Date of Last Report: **N/A**  
 4. FID Number: **11-2110991**  
 Applied For:  Not Applicable  
 5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
 6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
 8. This corporation has liability for intangible tax under Chapter 193, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent:  
**JONES, ELIZABETH G  
 266 S.W. 12TH STREET  
 DEERFIELD BEACH FL 33442**

10. Name and Address of New Registered Agent:  
 B1. Name:  
 B2. Street Address (P.O. Box Number is Not Acceptable):  
 B3.  
 B4. City: **FL** B5. Zip Code:

11. Pursuant to the provisions of Sections 607.01007 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 607.01007, Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME STREET ADDRESS CITY, ST, ZIP	<b>P ATKINSON, RONALD W 102 WICK DRIVE FORDS NJ</b>	13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.2 NAME STREET ADDRESS CITY, ST, ZIP	<b>C SIROTKIN, JOSEPH 10 COWPATH BROOKVILLE NY</b>	13.5 TITLE 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.3 NAME STREET ADDRESS CITY, ST, ZIP	<b>S ALVARADO, LILLIAN 21 ETHERIDGE DRIVE CARTERET NJ</b>	13.9 TITLE 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.4 NAME STREET ADDRESS CITY, ST, ZIP		13.13 TITLE 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.5 NAME STREET ADDRESS CITY, ST, ZIP		13.17 TITLE 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.6 NAME STREET ADDRESS CITY, ST, ZIP		13.21 TITLE 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in Section 193.02(9)(b), Florida Statutes. I further certify that the information included 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 of this report as an officer or director with an address.

SIGNATURE: *Lillian Alvarado* **Lillian Alvarado** **04/02/95** **(201)330-7700**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR