

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra H. Mathiam  
Secretary of State  
1900 BANKERS BUILDING

**APPROVED  
AND  
FILED**

95 MAY -1 AM 8:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **L96693** (1)

**DYNAMIC SOFTWARE SOLUTIONS, INC.**

DO NOT WRITE IN THIS SPACE

2. Principal Office of Corporation		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
2000 SOUTH DIXIE HIGHWAY SUITE 100-A MIAMI FL 33133		2000 SOUTH DIXIE HIGHWAY SUITE 100-A MIAMI FL 33133		08/27/1990	05/01/1994
21. State of Incorporation	22. State of Principal Office	26. State of Mailing Address	27. State of Principal Office	4. FEI Number	Applied For / Not Applicable
FL	FL	FL	FL	65-0212481	
23. City & State	24. City & State	28. City & State	29. City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
				<input type="checkbox"/>	
24. City & State	25. City & State	29. City & State	30. City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
				<input type="checkbox"/>	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

**KAUFMAN, JAMES R.**  
2699 SOUTH BAYSHORE DRIVE  
MIAMI FL 33133

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83.	84. City	85. Zip Code
			FL	

11. Pursuant to the provisions of Sections 607.014(1) 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 Sections 607.014(2), Florida Statutes.

SIGNATURE: *[Signature]* *Peter Kaufman* *4-27-95*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	D KAUFMAN, PETER E.	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	2000 S. DIXIE HWY. 100-A	2. NAME	
CITY & STATE	MIAMI FL	3. STREET ADDRESS	
NAME		4. CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		5. TITLE	
CITY & STATE		6. STREET ADDRESS	
NAME		7. CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		8. NAME	
CITY & STATE		9. STREET ADDRESS	
NAME		10. CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		11. NAME	
CITY & STATE		12. STREET ADDRESS	
NAME		13. CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		14. NAME	
CITY & STATE		15. STREET ADDRESS	
NAME		16. CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		17. NAME	
CITY & STATE		18. STREET ADDRESS	
NAME		19. CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in section 607.014(2)(g), Florida Statutes. I further certify that the information included on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if such an individual had personally filed the report on behalf of the corporation or the officer or the director empowered to execute the report as required by Chapter 143, Florida Statutes, and that my name appears in Block 12 of this report or on an attachment with an address.

SIGNATURE: *[Signature]* *Peter Kaufman* *4-27-95* *305-956-3702*