

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # L96693 (1)

1. Corporation Name
DYNAMIC SOFTWARE SOLUTIONS, INC.



Principal Place of Business: **2000 SOUTH DIXIE HIGHWAY SUITE 100-A MIAMI FL 33133**
 Mailing Address: **2000 SOUTH DIXIE HIGHWAY SUITE 100-A MIAMI FL 33133**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/27/1990	3a. Date of Last Report 05/01/1995
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0212481	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
<input type="checkbox"/> DELETE	D KAUFMAN, PETER E. 2000 S. DIXIE HWY. 100-A MIAMI FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		21 TITLE	22 NAME
<input type="checkbox"/> DELETE		23 STREET ADDRESS	24 CITY-ST-ZIP
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		31 TITLE	32 NAME
<input type="checkbox"/> DELETE		33 STREET ADDRESS	34 CITY-ST-ZIP
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		41 TITLE	42 NAME
<input type="checkbox"/> DELETE		43 STREET ADDRESS	44 CITY-ST-ZIP
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		51 TITLE	52 NAME
<input type="checkbox"/> DELETE		53 STREET ADDRESS	54 CITY-ST-ZIP
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		61 TITLE	62 NAME
<input type="checkbox"/> DELETE		63 STREET ADDRESS	64 CITY-ST-ZIP
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 if changed, or on an attachment with an address.

SIGNATURE: *Peter Kaufman* **PETER KAUFMAN** **9/30/96** **7058563702**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date of Filing)

CR2E034 (12/95)