

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.**  
**AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).**

PROFIT CORPORATION ANNUAL REPORT 1998

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



**FILED**  
 98 NOV -9 PM 3:23  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # L96693  
 1. Corporation Name  
Dynamic Software Solutions

Principal Place of Business Mailing Address  
2299 SW 37th Ave  
Suite 300  
Miami, FL 33145

DO NOT WRITE IN THIS SPACE  
 3. Date Incorporated or Qualified  
1990

2. Principal Place of Business 2a. Mailing Address  
 21 2299 SW 37th Ave 26  
 Suite, Apt. #, etc. 27 300  
 City & State 28 Miami, FL  
 Zip 29 33145 Country 30 USA

4. FEI Number Applied For  
65-0212481 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 owes or has paid the current year intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
James. R Kaufman  
Kaufman Rossin  
2699 S Bayshore Dr.  
Miami, FL 33133

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City FL 85 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<u>President</u>	<input type="checkbox"/> DELETE
NAME	<u>Peter Kaufman</u>	
STREET ADDRESS	<u>4110 Lybex St.</u>	
CITY-ST-ZIP	<u>Miami FL 33153</u>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<u>800002687338--2</u>
1.4 CITY-ST-ZIP	<u>-11/13/98--01079--001</u>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	<u>****\$50.00 ****\$50.00</u>
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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 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 Date: 11-30-98 Daytime Phone #: 305-461-9191

CR2E034 (5/98)

**D**YNAMIC  
**S**SOFTWARE  
**S**OLUTIONS

2299 SW 37<sup>th</sup> Avenue Suite 300 Miami, Florida 33145 305.461.9191 305.461.0791

October 13, 1998

Florida Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

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IN RE: Dynamic Software Solutions, Inc., a Florida Corporation

Dear Administrator:

This letter and accompanying check of \$550.00 is to reinstate the above corporation as active. We have moved several times and never received a corporate filing form for 1998. Our charter number is L96693 and Federal Employer ID is 65-021248. The company was founded on 8/24/90 and is subject to Florida Intangible Property Tax. Below is the current corporate information:

Dynamic Software Solutions, Inc.  
2299 SW 37<sup>th</sup> Avenue Suite 300  
Miami, FL 33145  
305.461.9191  
305.461.0791


Officers:

Peter E. Kaufman	President	4110 Lybyer Ave, Miami, FL 33133
John A. Kaufman	Executive Vice-President	2778 Day Ave, Unit 3, Miami, FL 33133
Steve Cabrera	Vice President	14312 SW 163 <sup>rd</sup> Street, Miami, FL 33177

The registered agent is Kaufman Rossin & Co., located at 2699 S Bayshore Dr, Suite 500, Miami, FL 33133, Phone is 305.858.5600.

Please direct any future correspondence to the attention of John Kaufman at the above address. Thank you in advance for your assistance.

Kindly,

  
John A. Kaufman  
Executive Vice President