

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

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**Apr 16 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P35077 (7)  
1. Corporation Name  
**DYNAMIC SYSTEMS-MECHANICAL CONTRACTORS, INC.**



Principal Place of Business: 3901 S LAMAR # 300 AUSTIN TX 78704 US  
Mailing Address: 3901 S LAMAR #300 AUSTIN TX 78704-7990 US

2. Principal Place of Business (21-25)  
2a. Mailing Address (26-30)

3. Date Incorporated or Qualified: 08/13/1991  
3a. Date of Last Report: 02/27/1996  
4. FEI Number: 74-2519426  
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 s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

10. Name and Address of New Registered Agent (81-85)

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 type) For printed name of officer or director (Block 12) or agent (Block 10) (Block 11 for registered agent signature required when changing) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	PD	REHMANN, RANDY J.	<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS		3901 S. LAMAR	
CITY-ST-ZIP		AUSTIN TX	
TITLE	VD	MARCHAND, JOHN R.	<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS		3901 S. LAMAR	
CITY-ST-ZIP		AUSTIN TX	
TITLE	STD	SCHMIDT, CHARLES D.	<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS		3901 S. LAMAR	
CITY-ST-ZIP		AUSTIN TX	
TITLE	D	FAULKNER, ROYCE W.	<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS		3901 S. LAMAR	
CITY-ST-ZIP		AUSTIN TX	
TITLE			<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	T/D	SCHMIDT, CHARLES D.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME			
13 STREET ADDRESS		3901 S. LAMAR	
14 CITY-ST-ZIP		AUSTIN, TX 78704	
21 TITLE	S	BRADLEY, JOYCE B.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME			
23 STREET ADDRESS		3901 S. LAMAR	
24 CITY-ST-ZIP		AUSTIN, TX 78704	
31 TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME			
33 STREET ADDRESS			
34 CITY-ST-ZIP			
41 TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME			
43 STREET ADDRESS			
44 CITY-ST-ZIP			
51 TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME			
53 STREET ADDRESS			
54 CITY-ST-ZIP			
61 TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME			
63 STREET ADDRESS			
64 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), 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 \_\_\_\_\_ DATE \_\_\_\_\_

CR2E034 (9/96)