## **2000 UNIFORM BUSINESS REPORT (UBR)**

## FILED Jan 21, 2000 8:00 am Secretary of State **DOCUMENT # P35077** 1. Entity Name DYNAMIC SYSTEMS-MECHANICAL CONTRACTORS, INC. 01-21-2000 90059 023 \*\*\*150.00 Principal Place of Business Mailing Address 3901 S LAMAR # 300 3901 S LAMAR #300 AUSTIN TX 78704 AUSTIN TX 78704-8718 704878 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 74-2519426 Not Applicable Ζiρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back). \* \* , Make Check Payable to Department of State APP THE THE - OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Delete ☐ Addition TITLE TITLE NAME NAME REHMANN, RANDY STREET ADDRESS STREET ADDRESS 3901 S LAMAR SUITE 300 CITY-ST-ZIP CITY-ST-ZIP AUSTIN TX 78704 ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME FAULKNER, ROYCE W. NAME STREET ADDRESS STREET ADDRESS 3901 S. LAMAR CITY-ST-ZIP CITY-ST-ZIP <u>Austin TX</u> -TITLE----^E Delete TITLE : Change Addition NAME **BRADLEY, JOYCE B** NAME STREET ADDRESS 3901 S. LAMAR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>austin tx</u> ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME SCHMIDT, CHARLES D NAME STREET ADDRESS STREET ADORESS 3901 S. LAMAR CITY-ST-7IP CITY-ST-ZIP <u>austin TX</u> ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME **NELSON, STEVE** STREET ADDRESS STREET ADDRESS 3901 S. LAMAR CITY-ST-ZIP CITY-ST-ZIP AUSTIN TX ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP