2004 FOR PROFIT CORPORATION

FILED Apr 28, 2004 8:00 am Secretary of State **ANNUAL REPORT (AR)** DOCUMENT # P95000092019 1. Entity Name 04-28-2004 90181 041 ***150.00 DYNAMIC IMPORT/EXPORT INC. Principal Place of Business Mailing Address 14604 SW 57 TERR. 14604 SW 57 TERR. MIAMI FL 33183 MIAMI FL 33183 2. Principal Place of Business 322 | E. || AVE 3. Mailing Address 19604 SW 57 TERR Suite, Apt. #, etc. Suite, Apt, #, etc. CR2E034 (11/03) City & State 4 1 A M / 4. FEI Number Applied For 65-0637732 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MARTINO, TANYA 14604 SW 57 TERR. MIAMI FL 33183 Street Address (P.O. Box Number is Not Acceptable) Zip Code 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. I am familiar with, and accept the obligations of registered agent. 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. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE D TITLE ☐ Change ☐ Addition ☐ Delete MARTINO, TANYA'-NAME NAME 14604 SW 57 TERR. STREET ADDRESS STREET ADDRESS MIAMI FL 33183 45 11 CITY-ST-ZIP CITY-ST-ZIP SECRETARY MARTINO, TANYA 14604 S.W.ST TERR MIAMI FL 33/83 TITLE D Delete TITE F ☐ Change Addition MARTINO, TANYA NAME STREET ADDRESS 14604 SW 57TH TERRACE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33183 CITY-ST-ZIP - Delete ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change □ Delete TITL # Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

4-26-04