

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90080 006 ***150.00

DOCUMENT # P96000078512

1. Entity Name
DINO BAGS, INC.

Principal Place of Business

Mailing Address

SIDNEY MORCUS BLVD.
 5307
 ATLANTA GA 30324

740 SIDNEY MORCUS BLVD
 APT 5307
 ATLANTA GA 30324-5600

0089484



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0728348

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AMERILAWYER CHARTERED
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PSTD	COBANOGLU, NURSEL	2025 LAVERS CIRCLE, SUITE 402	DELRAY BEACH FL 33444	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Company Secretary	COBANOGLU, NURSEL	740 Sidney Marcus Blvd. Apt 5307	Atlanta, GA 30324	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	John B. Ebbesmeyer	7380 Sand Lake Road Suite 500	Orlando, FL 32819	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Cuneyt Akpinar	Kozyatapi, Ankara Asfalti, AR PLAZA	Kadikoy - ISTANBUL - TURKEY.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Cengiz Cesur	Bogdat Caddesi No: 371	Saskinbakkal - ISTANBUL / TURKEY	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Bedriye H. Suzek	740 Sidney Marcus Blvd. # 5307	Atlanta, GA 30324	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Bulent Canakci	Bogdat Caddesi No 371	Saskinbakkal - ISTANBUL - TURKEY	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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.

SIGNATURE: N. Kobanoglu **REQUIRED**

Date: April 25, 2000 Daytime Phone #: 404-467-0480

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/99)