

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90059 036 ***150.00

DOCUMENT # P96000093205

1. Entity Name
DYNAMIC WORLD SERVICES, INC.

Principal Place of Business 2226 BALLARD AVENUE ORLANDO FL 32833	Mailing Address P.O. BOX 678713 ORLANDO FL 32867 US
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2. Principal Place of Business 5151 SAIL WIND CIRCLE	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State ORLANDO, FLORIDA	City & State
Zip 32810	Country U.S.A

4. FEI Number 59-3410361	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CARVALHO, ANA C
 2226 BALLARD AVENUE
 ORLANDO FL 32833**

7. Name and Address of New Registered Agent

Name ANA C. CARVALHO
Street Address (P.O. Box Number is Not Acceptable) 5151 SAIL WIND CIRCLE
City ORLANDO
State FL
Zip Code 32810

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
PTD Delete <input type="checkbox"/>	CARVALHO, JOHN P 2226 BALLARD AVENUE ORLANDO FL 32833	<input type="checkbox"/> Change <input type="checkbox"/> Addition	5151 SAIL WIND CIRCLE ORLANDO FL 32810
VPSD Delete <input type="checkbox"/>	CARVALHO, ANA C 2226 BALLARD AVENUE ORLANDO FL 32833	<input type="checkbox"/> Change <input type="checkbox"/> Addition	5151 SAIL WIND CIRCLE ORLANDO FL 32810
Delete <input type="checkbox"/>		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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Delete <input type="checkbox"/>		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: John P. Carvalho **JOHN P. CARVALHO** 1-23-2001 (407) 294-3720
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #