
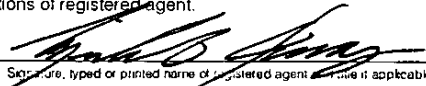



2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 02, 2005 8:00 am
Secretary of State

09-02-2005 90013 026 ***558.75

DOCUMENT # P99000005783 1. Entity Name INSTALLATION DYNAMICS, INC.																											
Principal Place of Business 1865 KENNEDY CAUSWAY 7F MIAMI BEACH FL 33141 US		Mailing Address 1865 KENNEDY CAUSWAY 7F MIAMI BEACH FL 33141 US																									
2. Principal Place of Business 1865 Kennedy Causway Suite, Apt. #, etc. 7F		3. Mailing Address 1865 Kennedy Causway Suite, Apt. #, etc. 7F																									
City & State Miami Beach FL		City & State Miami Beach FLA																									
Zip 33141 Country DAVE		Zip 33141 Country DAVE																									
6. Name and Address of Current Registered Agent KOREY, MICHAEL J 1865 KENNEDY CAUSWAY APT 7F MIAMI BEACH FL 33141		7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State																											
10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">CEO</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>KOREY, MICHAEL J</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>6400 NE 4TH CT.</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>MIAMI FL 33138</td> <td></td> </tr> </table>		TITLE	CEO	<input type="checkbox"/> Delete	NAME	KOREY, MICHAEL J		STREET ADDRESS	6400 NE 4TH CT.		CITY- ST- ZIP	MIAMI FL 33138		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;"></td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY- ST- ZIP		
TITLE	CEO	<input type="checkbox"/> Delete																									
NAME	KOREY, MICHAEL J																										
STREET ADDRESS	6400 NE 4TH CT.																										
CITY- ST- ZIP	MIAMI FL 33138																										
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																									
NAME																											
STREET ADDRESS																											
CITY- ST- ZIP																											
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		AUG, 29, 2005 305-864-4189 Date Daytime Phone #																									



1st MOORE CR2E034 (10/04)

4. FEI Number **65-0890287** Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required