

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 540026
1. Corporation Name

Dynamic Resources, Inc.

Principal Place of Business Mailing Address
1866 Independence Square
Dunwoody, Georgia 30338

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
May 25, 1977

2. Principal Place of Business a1 1866 Independence Square a2 Suite, Apt. #, etc. a3 City & State a4 Dunwoody, Georgia a5 Zip a6 30338	2a. Mailing Address 2b. Suite, Apt. #, etc. 2c. City & State 2d. Zip 2e. Country	4. FEI Number 59-1741721	Applied For Not Applied
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30 ☐ Yes ☐ No			

8. Name and Address of Current Registered Agent

CT Corporation System
1200 S. Pine Island Road
Plantation, Florida 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 FL 86 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when substituting)

Date

12. OFFICERS AND DIRECTORS	
TITLE	12.1 TITLE
NAME	12.2 NAME
STREET ADDRESS	12.3 STREET ADDRESS
CITY-ST-ZIP	12.4 CITY-ST-ZIP
TITLE	12.5 TITLE
NAME	12.6 NAME
STREET ADDRESS	12.7 STREET ADDRESS
CITY-ST-ZIP	12.8 CITY-ST-ZIP
TITLE	12.9 TITLE
NAME	12.10 NAME
STREET ADDRESS	12.11 STREET ADDRESS
CITY-ST-ZIP	12.12 CITY-ST-ZIP
TITLE	12.13 TITLE
NAME	12.14 NAME
STREET ADDRESS	12.15 STREET ADDRESS
CITY-ST-ZIP	12.16 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
13.1 TITLE	☐ Change ☐ Add
13.2 NAME	500002545295--9
13.3 STREET ADDRESS	-06/03/98--01009--017
13.4 CITY-ST-ZIP	*****8.75 *****8.75
13.5 TITLE	☐ Change ☐ Add
13.6 NAME	500002545295--9
13.7 STREET ADDRESS	-06/03/98--01009--018
13.8 CITY-ST-ZIP	*****550.00 *****550.00
13.9 TITLE	☐ Change ☐ Add
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY-ST-ZIP	
13.13 TITLE	☐ Change ☐ Add
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment within an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

5/28/98

Date

Daytime Phone #