SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE **PROFIT** CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (1)DOCUMENT # 576515 DYNAMIC KITCHENS, INC. Mailing Address Principal Place of Business 3042 S W 4TH AVE 3042 S W 4TH AVE FT LAUDERDALE FL 33315 FT LAUDERDALE FL 33315 3a. Date of Last Report 3. Date Incorporated or Qualified 06/28/1995 06/22/1978 Applied For FEI Number Mailing Address 2. Principal Place of Business Not Applicable 59-1844060 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199 032 Country Zip Country Ζıρ Yes No Florida Statutes 30 29 25 24 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BROOKS, MARTIN G., P.A. Street Address (P.O. Box Number is Not Acceptable) 82 2620 HOLLYWOOD BLVD HOLLYWOOD FL 33020 83 Zip Code 85 84 City 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Bog stored Agent's grature required when reinstalling) SIGNATURE Signature itypical or printed name of registrand agent and the if approable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8)OFFICERS AND DIRECTORS 13. 12 Change Addition DELETE 1 t TIPLE TIFLE CR2E034 1.2 NAME RAMPUTI, JOSEPH WILLIAM NAME 13 STREET ADDRESS 11801 TARA DR STREET ADDRESS 1.4 CHY - \$1 - ZIP PLANTATION FL CITY - ST - ZIP Change Addition DELETE 2 1 JULE THE 2.2 NAME CHAVEZ, JAVIER NAME 2.3 STREET ADDRESS 7365 NW 52ND COURT STREET ADDRESS 2 4 CITY - ST - 7/P LAUDERHILL FL CITY-ST-ZIP Change Addition DELETE 33 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP DITY-ST-7/P Change Addition DELETE 4 1 11TLE TITLE 4 2 NAME NAME 43 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$T - ZIP CITY-ST-ZIP Change Addition DELETE 5 1 THILE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 61 TILE 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - \$1 - 7IP

SIGNATURE: ..

NAME

STREET ADDRESS

NATED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TOPED PY

14. Ido hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I turther 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 control or the receiver or trusted empowered to execute this report as required by Chapter 617. Florida Statutes, and that my name appears in Block 12 or Block 13 if chapter or or an attachment with an address. 7-29-96 954-522-2477