FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # (6)DYNAMIC CONTRACTING CO. INC. Principal Place of Business Mailing Address 20725 N.E. 16TH AVENUE 20725 N.E. 16TH AVENUE SUITE 47 SHITE 47 N. MIAMI BEACH FL 33179 N. MIAMI BEACH FL 33179 3. Date Incorporated or Qualified 3a. Date of Last Report 06/02/1982 03/28/1995 2. Principal Place of Business 2a. Mailing Address 4. FELNambor Applied For 21 26 59-2222448 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country $Z_{\rm ip}$ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROSENTHAL, CHARLES Street Address (P.O. Box Number is Not Acceptable) 82 2660 HOLLYWOOD BOULEVARD 83 HOLLYWOOD FL 33020 84 City Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little if a plicable DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 THUE Addition NAME CORTEZ, LUIS 1.2 NAME STREET ADDRESS 20725 N.E. 16TH AVE., \$47 13 STREET ADDRESS CITY-ST-ZIP NO MIAMI BEACH FL 14 OTY - \$1 - 7(P THILE DELETE 2 1 TITLE Addition Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZiP 24001Y-S1 ZIP TITLE DELETE 3 1 11114 Change Add tion NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY - ST - ZIP TITLE DELETÉ 4 1 TITLE Charige Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 C(TY - \$1 - Z(P) DELETE TITLE 5 1 TOLE ☐ Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-S1-ZIP 5.4 CHTY - ST- ZIP TITLE ☐ DELETE 6 1 TITLE [] Change C Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 hment with an address.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - \$1 - 7IP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

1 - 15 - 96 (305) 9474699

(12/95)

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