

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra H. Matheson Secretary of State Division of CORPORATIONS
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APPROVED
AND
FILED

SEP 11 PM 2:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000000128 (9)
1. Corporation Name DYNAFLAIR CORPORATION

Principal Place of Business 4701 EAST ACLINE DR. TAMPA FL 33605	Mailing Address 4701 EAST ACLINE DR. TAMPA FL 33605
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(DO NOT WRITE IN THIS SPACE)

3. Date Incorporation or Qualification 01/04/1993	3a. Date of Last Report 05/01/1994
4. FEI Number 22-2470916	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 198.032, Florida Statutes. ☒ Yes ☐ No	

2. Principal Place of Business 21. State Apt. # etc. 22. City & State 23. Zip	2a. Mailing Address 26. State Apt. # etc. 27. City & State 28. Zip
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9. Name and Address of Current Registered Agent

REEVES, SABINA 4701 EAST ACLINE DR. TAMPA FL 33605

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 607.01(2)(c) 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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.01(2)(c), Florida Statutes.

SIGNATURE **Sabina H. Reeves, Vice-President** **4-20-95**

12. OFFICERS AND DIRECTORS

1. NAME DCP PASTERNAK, GERALD S 4701 EAST ACLINE DR. TAMPA FL 33605	
2. NAME S REEVES, SABINA 4701 EAST ACLINE DR. TAMPA FL 33605	
3. NAME	
4. NAME	
5. NAME	
6. NAME	
7. NAME	
8. NAME	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	☐ Change ☐ Addition
2. NAME	
3. NAME	☐ Change ☐ Addition
4. NAME	
5. NAME	☐ Change ☐ Addition
6. NAME	
7. NAME	☐ Change ☐ Addition
8. NAME	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.01(2)(c), Florida Statutes. I further certify that the information is made effect on the annual report or supplementary annual report as 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 this corporation or this return or neither are required to use on this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an affidavit filed with an address.

SIGNATURE:  **GERALD S. PASTERNAK** **4/20/95** **(813) 277-4770**