

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mather
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000003210 (2)

1. Corporation Name
DYNESCO, INC.



Principal Place of Business

820 NE 24TH LANE
UNIT 110
CAPE CORAL FL 33909

Mailing Address

820 NE 24TH LANE
UNIT 110
CAPE CORAL FL 33909

2. Principal Place of Business

2a. Mailing Address

21 2340 ANDALUSIA BLVD
Suite Apt. #, etc.

26 2340 ANDALUSIA BLVD
Suite Apt. #, etc.

22 City & State

27 City & State

23 CAPE CORAL FL
Zip Country

28 CAPE CORAL FL
Zip Country

24 33909

29 33909

9. Name and Address of Current Registered Agent

BECHER, JAMES J
820 NE 24TH LANE
UNIT 110
CAPE CORAL FL 33909

3. Date of Incorporation For Qualification
07/13/1993

3a. Date of Last Report
04/24/1995

4. FBT Number
36-2982950

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 filing the tax under s. 199.032,
Florida Statute ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Applicable)
2340 ANDALUSIA BLVD

83

84 City & State
CAPE CORAL, FL

85 Zip Code
FL 33909

11. I, the undersigned, being a resident qualified person, do hereby certify that I am an officer or director of the corporation and am qualified to file this report for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I do hereby certify that I am an officer or director of the corporation and am qualified to file this report for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

12.

OFFICER, DIRECTOR, OR AGENT

TITLE ☐ De File

NAME BECHER, JAMES J

STREET ADDRESS 2511 SE 20 AVE

CITY, STATE, ZIP CAPE CORAL FL

TITLE DPT ☐ De File

NAME BECHER, NANCY S

STREET ADDRESS 2511 SE 20 AVE

CITY, STATE, ZIP CAPE CORAL FL

TITLE ☐ De File

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE ☐ De File

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE ☐ De File

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE ☐ De File

NAME

STREET ADDRESS

CITY, STATE, ZIP

14. I, the undersigned, certify that I am an officer or director of the corporation and am qualified to file this report for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I do hereby certify that I am an officer or director of the corporation and am qualified to file this report for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Nancy S. Becher
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/96 941-574-2011

CR2E034 (12/95)