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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

F93000003210 (2)

DYNESCO, INC.

Principal Place	e of Business	Mailing Address	Mailing Address			I JABILAN KILO KATAR IKINI EBINI BBINI BBINI BBINI BIRA KIKIN DIBAN KININ BBINI BBINI BBINI BBINI BBINI
2340 ANDALUSIA BLVD		2340 ANDALUSIA BL	2340 ANDALUSIA BLVD			
CAPE CORAL FL 33909		CAPE CORAL FL 33909				DO NOT WRITE IN THIS SPACE
US		US				3. Date Incorporated or Qualified
						07/13/1993
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26	26			36-2982950 Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			eg 75 Additional
22		27	27			5. Certificate of Status Desired Fee Required
City & State	e _	City & State	City & State			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	<b></b>		,	8. This corporation owes or has paid the current year Intangible
24	25 Name and Address of Curr	29	30	<del></del>		Personal Property Tax due June 30. XYes No  10. Name and Address of New Registered Agent
	<del></del>	eni negisterea Agent		81	Name	
	CHER, JAMES J			Ľ	Name	?
	O ANDALUSIA BLVD			82	Street	t Address (P.O. Box Number is Not Acceptable)
	T-440-			83		
UAI	PE CORAL FL 33909					
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607,1508, Florida S	tatutes, the a	boy	e-named	d 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 607,0505. Florida Statutes.						
	THE PARTIES WITH, BITTE BOOCH, THE OWN	igations of, accitor 607.000.	o, Florida dia	itutes	5.	
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable	(NOTE: Registere	d Ape	ent algnaturi	ro required when reinstating) DATE
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DVS	☐ DELETE	1.1 1	TLE		Change Addition
NAME	<b>BE</b> CHER, JAMES J		1.2 N	ame		
STREET ADDRESS				TREET	ADDRESS	· <b> </b>
CITY-ST-ZIP	CAPE CORAL FL			ITY-S	T-ZIP	
TITLE	<b>DPT</b>	DELETE		2.1 TITLE		Change Addition
NAME	BECHER, NANCY S		2.2 M			
STREET ADDRESS	2511 SE 20 AVE		2.3 S	TREET	ADDRESS	
CITY-ST-ZIP	<u>Cape</u> coral fl	T progra			ST - ZIP	
TITLE	☐ DELETE 3.11				Change	
NAME CYPET ADDRESS			32 N		LOBBEOS	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE		☐ DELE <b>TE</b>		3-4. CITY-ST-Z#P		☐ Change ☐ Addition
NAME				4.2 NAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP						
TITLE		DELETE	4.4 CITY - SY - Z  DELETE 5.1 TITLE		1-ZIF	Change Addition
NAME			5.2 N			tand 100/101/
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				ITY-S		
TITLE		☐ DELETE				☐ Change ☐ Addition
NAME	£		6.2 N			_ ,
STREET ADDRESS					ADORESS	
- 1						

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(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 with an address.

**FILED** 

May 06 1998 8:00am

Secretary of State