2004 FOR PROFIT CORPORATION

Mailing Address

P. O. BOX 17426

3. Mailing Address

Suite, Apt. #, etc.

City & State

WEST PALM BEACH FL 33416

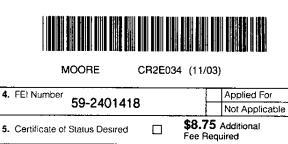
ANNUAL REPORT (AR) DOCUMENT # H05664 1. Entity Name DYNAMIC RESOURCE MANAGEMENT CORPORATION



FILED Mar 31, 2004 8:00 am **Secretary of State**

03-31-2004 90037 044 ***150.00

1000501



BIELEN, GERALD F. 15530 MEADOW WOOD DRIVE WEST PALM BEACH FL 33414

Country

6. Name and Address of Current Registered Agent

Principal Place of Business

15530 MEADOW WOOD DRIVE

WEST PALM BEACH FL 33414

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition BIELEN, GERALD F. NAME NAME STREET ADDRESS 15530 MEADOW WOOD DR STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL CITY-ST-ZIP STD Delete TITLE Change Addition GILMER, PHIL B NAME NAME STREET ADDRESS 251 ROYAL PALM WAY STREET ADDRESS CITY-ST-ZIP PALM BEACH FL CITY-ST-ZIP TITLE Delete TITLE Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

Country

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GERALD BIELEN PRESIDENT 3/26/04 361-758-0203