FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 MAY 18 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J64162** **(7)**

1. Corporation Name

DYNABILT TECHNOLOGY INTERNATIONAL CORPORATION

Principal Place of Business	Mailing Address
C/O HAROLD BADER 9628 NE 2ND AVE., STE. E MIAMI SHORES FL 33138	C/O HAROLD BADER 9628 NE 2ND AVE., STE. E MIAMI SHORES FL 33138

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/27/1987
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 1805 N.E. 142 St.
Suite, Apt #, etc. 22
City & State 23 NO. MIAMI, FL
Zip 24 33161 Country 25 DADE

2a. Mailing Address
26 P.O. BOX 610697
Suite, Apt #, etc. 27
City & State 28 NO. MIAMI, FL
Zip 29 33261 Country 30 DADE

4. FEI Number: 59-2798480 ☐ 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. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BADER, HAROLD
9628 NE 2ND AVE., SUITE E
MIAMI SHORES FL 33138

10. Name and Address of New Registered Agent

81 Name: BADER, HAROLD
82 Street Address (P.O. Box Number is Not Acceptable): 1805 N.E. 142 St.
83
84 City: NO. MIAMI, FL 85 Zip Code: 33161

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when mandatory) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VP	11 TITLE		☒ Change ☐ Addition
NAME	BADER, HAROLD	12 NAME		
STREET ADDRESS	9628 NE 2ND AVE.	13 STREET ADDRESS	1805 N.E. 142 ST.	
CITY ST ZIP	MIAMI SHORES FL	14 CITY ST ZIP	NO. MIAMI, FL 33161	
TITLE	P	21 TITLE		☒ Change ☐ Addition
NAME	BADER, MYRNA	22 NAME		
STREET ADDRESS	9628 NE 2ND AVE.	23 STREET ADDRESS	1805 N.E. 142 ST.	
CITY ST ZIP	MIAMI SHORES FL	24 CITY ST ZIP	NO. MIAMI, FL 33161	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME	300001494333	
STREET ADDRESS		33 STREET ADDRESS	-05/19/95--01028--001	
CITY ST ZIP		34 CITY ST ZIP	****225.00 ****225.00	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

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)(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.

5/18/95

SIGNATURE: HAROLD BADER/ Harold Bader 5/15/95 305/919-9800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0145250 CP