

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90062 002 ***150.00

DOCUMENT # P00000032796

1. Entity Name
DYNATRON MEDIA, INC.

Principal Place of Business
14400 NW 78TH AVENUE
MIAMI FL 33126

Mailing Address
14400 NW 78TH AVENUE
MIAMI FL 33126

2. Principal Place of Business
1440 NW 78TH AVENUE

3. Mailing Address
1440 NW 78TH AVENUE

Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number **65-0995313**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHAO, JANE
3401 NORTH FEDERAL HIGHWAY
SUITE 209
BOCA RATON FL 33431

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME P LAU, KUEN WEI	<input type="checkbox"/> Delete	TITLE NAME 1440 NW 78TH AVENUE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 14400 NW 78TH AVENUE		STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33126		CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **X** *[Signature]* **KUEN WEI LAU, PRESIDENT** 4/15/2002