

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 09, 2002 8:00 am
Secretary of State

05-09-2002 90092 033 ***150.00

DOCUMENT # P01000040967

1. Entity Name

DYNASTY ENTERTAINMENT, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

PO Box 47771
Suite, Apt. #, etc.

PO Box 47771
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

TAMPA FL

TAMPA, FL

4. FEI Number

Applied For

Not Applicable

65-1096927

Zip

Country

Zip

Country

33647

FL

33647

FL

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name JOSEPH G. FERNANDEZ

Street Address (P.O. Box Number is Not Acceptable)

10310 VENTIA REAL AVE BLDG 8 #307

City

TAMPA

FL

Zip Code 33647

**DO NOT WRITE
IN THIS SPACE**

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

Joseph G. Fernandez

JOSEPH G. FERNANDEZ

DATE 4/23/02

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

January 1, May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DIRECTOR</u> <u>FERNANDEZ, JOSEPH</u> <u>10310 VENTIA REAL AVE BLDG 8 #307</u> <u>TAMPA, FL 33647</u>
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IN THIS SPACE**

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph G. Fernandez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH G. FERNANDEZ, Pres. 4/24/02
(813) 732 5273

Date

Daytime Phone #