


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 20, 2004 8:00 am**  
**Secretary of State**

01-20-2004 90073 019 \*\*\*150.00

DOCUMENT # P01000102154		
1. Entity Name NEW DYNAMIC MARKETING, INC.		

Principal Place of Business 4809 NW 19 ST COCONUT CREEK, FL 33063	Mailing Address 4809 NW 19 ST COCONUT CREEK, FL 33063
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2. Principal Place of Business 211 E. Prospect Road Suite, Apt. #, etc.	3. Mailing Address 211 E. Prospect Road Suite, Apt. #, etc.
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City & State Oakland Park, FL	City & State Oakland Park, FL
Zip 33334	Country U.S.A.



01132004 Chg-P CR2E034 (10/03)

4. FEI Number 01-0641558	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HARRIS, GARLAND E 4809 NW 19 ST COCONUT CREEK, FL 33063	
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7. Name and Address of New Registered Agent Name: Eric Filkins, CPA Street Address (P.O. Box Number is Not Acceptable): 440 S. Federal Highway, Ste. 204 City: Deerfield Beach, FL Zip Code: 33441	
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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: <i>Eric Filkins, CPA</i> Signature, typed or printed name of registered agent and title if applicable.	DATE: 1/13/04 (NOTE: Registered Agent signature required when reinstating)
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST HARRIS, GARLAND E 4809 NW 19 ST COCONUT CREEK, FL 33063 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P/STT David Appadoca 211 E. Prospect Road Oakland Park, FL 33334 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	OLV Leroy Schwuchow 211 E. Prospect Road Oakland Park, FL 33334 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 all other like empowered.

SIGNATURE: <i>David Appadoca</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE: 1/13/04 Daytime Phone #
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