

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 04, 2004 8:00 am**  
**Secretary of State**

05-04-2004 90199 017 \*\*\*150.00

**DOCUMENT # P02000040106**

1. Entity Name  
DYNAMIC PAINT AND BODY, INC.



Principal Place of Business  
480 EAST 25TH STREET  
HIALEAH, FL

Mailing Address  
480 EAST 25TH STREET  
HIALEAH, FL



03292004 No Chg-P **ENCLOSURE** CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **65-1001483 68-0576119**  
Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

KEYS, CAROL F  
12700 BISCAYNE BLVD., SUITE 401  
NORTH MIAMI, FL 33181

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

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**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	D, P
NAME	ALEXANDER, LOUIS
STREET ADDRESS	12100 S.W. 47 STREET
CITY - ST - ZIP	MIAMI, FL 33175
TITLE	D, S
NAME	DIAZ, ORESTES
STREET ADDRESS	12100 S.W. 47 STREET
CITY - ST - ZIP	MIAMI, FL 33175
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:** *Louis Alexander*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/07/2004 (305) 351-7777  
Date Daytime Phone #