

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000093531

Entity Name: DYNASTY, INC.

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

2420 PARSONS POND CIR
KISSIMMEE,, FL 34743

New Principal Place of Business:

1697 WATAUGA AVENUE
APT. 202
ORLANDO, FL 32812

Current Mailing Address:

2420 PARSONS POND CIR
KISSIMMEE,, FL 34743

New Mailing Address:

1697 WATAUGA AVENUE
APT. 202
ORLANDO, FL 32812

FEI Number: 41-2058240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHACON, OSCAR
2420 PARSONS POND CIRCLE
KISSIMMEE, FL 34743 US

Name and Address of New Registered Agent:

CHACON, OSCAR
1697 WATAUGA AVENUE
APT. 202
ORLANDO, FL 32812 US

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: OSCAR CHACON

04/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHACON, OSCAR
Address: 2420 PARSONS POND CR.
City-St-Zip: KISSIMMEE, FL 34743

Title: VP () Delete
Name: GONZALEZ, JANETT
Address: 2420 PARSONS POND CIR.
City-St-Zip: KISSIMMEE, FL 34743

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHACON, OSCAR
Address: 1697 WATAUGA AVENUE, APT. 202
City-St-Zip: ORLANDO, FL 32812

Title: VP (X) Change () Addition
Name: GONZALEZ, JANETT
Address: 1697 WATAUGA AVENUE, APT. 202
City-St-Zip: ORLANDO, FL 32812

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OSCAR CHACON

P

04/21/2005

Electronic Signature of Signing Officer or Director

Date