

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Apr 28, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # P03000067327**

1. Entity Name  
**DYNAMIC CREATIVE SOLUTIONS, INC.**



Principal Place of Business  
**12124 N.W. 15TH CT.  
CORAL SPRINGS, FL 33071**

Mailing Address  
**12124 N.W. 15TH CT.  
CORAL SPRINGS, FL 33071**



04242006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-0095784**

Applied For  
Not Applicable

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

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

**GONZALEZ, DANIEL  
12124 N.W. 15TH CT.  
CORAL SPRINGS, FL 33071**

**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, 2006 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
GONZALEZ, DANIEL  
12124 N.W. 15TH CT.  
CORAL SPRINGS, FL 33071**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
MAC GREGOR, GAYLE T  
12124 N.W. 15TH CT.  
CORAL SPRINGS, FL 33071**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
GONZALEZ, DEBORAH R  
12124 N.W. 15TH CT.  
CORAL SPRINGS, FL 33071**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000541613  
05/10/06-80065-018 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplement thereto 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 officer or director 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 an authorized empowered.

**SIGNATURE:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*April 28, 2006* 954  
255-6441