2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000140288

FILED Jan 04, 2007 Secretary of State

Entity Name: DYNAMIC COMMUNITY MANAGEMENT SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 3401 CARAMBOLA CIR S 5603 NORTH STATE RD 7 COCONUT CREEK, FL 33066 FORT LAUDERDALE, FL 33319 US **Current Mailing Address: New Mailing Address:** 3401 CARAMBOLA CIR S P.O. BOX 824266 COCONUT CREEK, FL 33066 PEMBROKE PINES, FL 33082 US FEI Number: 20-5906595 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: VAN LWWUWEN, DEBORAH YU, PETER CPA 3401 CARAMBOLA CIR S 2240 NW 129 TERRACE COCONUT CREEK, FL 33066 US PEMBROKE PINES, FL 33028 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: PETER YU 01/04/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: PRFS () Change (X) Addition FOSTER, CIRA R PRESIDE Name: Name: 5603 NORTH STATE RD 7 Address: Address: City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33319 US Title: () Delete Title: () Change (X) Addition Name: Name: NASIR, SHANEEZA A TREASUR 5603 NORTH STATE RD 7 Address: Address: FORT LAUDERDALE, FL 33319 US City-St-Zip: City-St-Zip: () Change (X) Addition Title: Title: () Delete SECR Name: POSTMAN, MARIA L SECRETA Name: 5603 NORTH STATE RD 7 Address Address: City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33319 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CIRA FOSTER PRES 01/04/2007