

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P36214

1. Entity Name

DYNO NOBEL FLORIDA, INC.

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90029 033 ***150.00

Principal Place of Business

11420 NW 134 ST
MIAMI FL 33025

Mailing Address

11420 NW 134 ST
MIAMI FL 33178-3113

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

87-0489665

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required.

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☒ Delete
NAME HAWS, GEORGE A.
STREET ADDRESS 8910 MIRAMAR PARKWAY, STE. 207
CITY-ST-ZIP MIRAMAR FL

TITLE VP/D ☒ Change ☐ Add
NAME
STREET ADDRESS 11420 NW 134 ST.
CITY-ST-ZIP Miami, FL 33178

TITLE D ☒ Delete
NAME PINAULT, ROBERT
STREET ADDRESS 11TH FLOOR CROSSROAD TOWER
CITY-ST-ZIP SALT LAKE CITY UT 84144

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME MITCHELL, TRANNY
STREET ADDRESS 11TH FLOOR CROSSROADS TOWER
CITY-ST-ZIP SALT LAKE CITY FL

TITLE P/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME SIDMAN, KARL M.
STREET ADDRESS 8910 MIRAMAR PARKWAY, SUITE 207
CITY-ST-ZIP MIRAMAR FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 11420 NW 134 ST.
CITY-ST-ZIP Miami, FL 33178

TITLE D ☐ Delete
NAME SHEA, RICHARD
STREET ADDRESS 11TH FLOOR CROSSROADS TOWER
CITY-ST-ZIP SALT LAKE CITY FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D,VP ☒ Change ☒ Addition
NAME Jeffrey G. Smith
STREET ADDRESS 110 McHardy Road
CITY-ST-ZIP Whitesburg, GA 30185

13. 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

Karl M. Sidman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

305-823-6999

X 2003

1/21/00